

Folio no.:  
Name :

## FINANCIAL TRANSACTION SLIP

**J.P.Morgan**  
Asset Management

TRANSACTION SLIP

### ● ADDITIONAL PURCHASE REQUEST

Scheme name & plan \_\_\_\_\_

Option: (Please ✓)  Growth  Dividend payout or  Dividend reinvestment

Instrument amount (Rs.) \_\_\_\_\_

DD charges, if any, (Rs.) \_\_\_\_\_

Instrument no. & date \_\_\_\_\_

Bank name & branch \_\_\_\_\_

### DISTRIBUTOR INFORMATION

(Please read the instructions before investing)

Broker Name & ARN code **Bonanza - 0186**

Sub-broker ARN code \_\_\_\_\_

Sub-broker code \_\_\_\_\_

Employee Unique  
Identification No. \_\_\_\_\_

**Applicable to NRI/FII/PIO:** I am / we are not U.S. or Canadian person(s) or resident(s) in or citizen(s) of the United States of America or Canada.

**In case of non residents** (please tick as appropriate): The units issued to me/us will be held as  investment  business asset

**Corporate applicants only:** (A corporation should affix its company stamp or seal, if any.) I am/we are duly authorised to execute and deliver this Transaction Document. The corporation is not organised or incorporated under the laws of the United States of America.

I/We hereby declare that I/we am/are authorised to make this investment and that the amount invested in the Scheme is through legitimate sources only and does not involve and is not designed for the purpose of any contravention or evasion of any Act, Rules, Regulations, Notifications or Directions issued by any regulatory authority of India. I/We hereby authorise JPMorgan Mutual Fund, its Investment Manager and / or its agents to disclose details of my investment to my bank(s) / JPMorgan Mutual Fund's bank(s) and/or Distributor/Broker/Investment Advisor. I/We have neither received nor been induced by any rebate or gifts, directly or indirectly, in making this investment. I/We declare that the information given in this application form is correct, complete and truly stated.

Investors should mention the EUIN of the person who has advised the investor. If left blank, the fund will assume following declaration by the investor. "I/We hereby confirm that the EUIN box has been intentionally left blank by me/us as this is an "execution only transaction" without any interaction or advice by the employee/relationship manager/sales person of the above distributor or notwithstanding the advice of in-appropriateness, if any provided by the employee/relationship manager/sales person of the distributor and the distributor has not charged any advisory fees on this transaction."

Upfront commission shall be paid directly by the investor to the AMFI registered Distributors based on the investor's assessment of various factors including the service rendered by the distributor.

**By signing this form, I/ we explicitly warrant that I/we remain in full compliance with all the declarations set out in section 10 of the Common Application Form previously completed by me/us and these declarations are deemed repeated herein in full, for this and all future transactions in JPMorgan Mutual Fund.**

I/We have read and understood the contents of the Scheme Information Document and Statement of Additional Information / Key Information Memorandum of the Scheme and any Addenda issue

Date : \_\_\_\_\_

Signature(s)

X

\_\_\_\_\_  
Sole / First Holder

X

\_\_\_\_\_  
Sole / Second Holder

X

\_\_\_\_\_  
Sole / Third Holder

Folio no.:

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TRANSACTION SLIP

**● CHANGE OF ADDRESS (For Non-KYC folios)**

New address										
City										
State/country					Pin					
Tel. no. (O/R)					(M)					
E-mail										

**● SWITCH REQUEST**

(Please refer to the Scheme Information Document of the Scheme you are switching from and to).

I/We wish to switch Rs. \_\_\_\_\_ or \_\_\_\_\_ units

From (scheme) \_\_\_\_\_

(Please ✓)  Growth  Dividend reinvestment or  Dividend payout

To (scheme) \_\_\_\_\_

(Please ✓)  Growth  Dividend reinvestment or  Dividend payout

**● SERVICES & FACILITIES**

I/We wish to receive the following via e-mail instead of physical document.

Account statement  Quarterly review, annual report & other disclosures

Email REQUIRED \_\_\_\_\_

Mobile \_\_\_\_\_

**● REDEMPTION REQUEST**

Please redeem Rs. \_\_\_\_\_ or \_\_\_\_\_ Units or  all units from the Scheme \_\_\_\_\_

**● Payout Bank (for multiple bank registered folios)**

Bank Name \_\_\_\_\_

Bank A/C No. \_\_\_\_\_

RTGS/NEFT/IFSC Code \_\_\_\_\_

I/We have read and understood the contents of the Scheme Information Document and Statement of Additional Information / Key Information Memorandum of the Scheme and any Addenda issued till date and agree to abide by the terms, conditions, rules and regulations of the Scheme as on the date of this transaction.

Date : \_\_\_\_\_

Signature(s)

X

\_\_\_\_\_  
Sole / First Holder

X

\_\_\_\_\_  
Sole / Second Holder

X

\_\_\_\_\_  
Sole / Third Holder