

TRANSACTION FORM

(For Existing Unit Holders only)

Please read the instructions overleaf carefully and complete the relevant section legibly in black/dark coloured ink and in BLOCK CAPITALS. Please strike out sections that you intend to leave blank. Distributor/Broker Code **Sub-Broker Code Branch Code** Relationship Manager NAME **ARN.** 13308 MOBILE Initial commission shall be paid directly by the investor to the AMFI registered distributor on the investors' assessment of various factors including the service rendered by the distributor. **UNIT HOLDERS' DETAILS (MANDATORY)** (See note 1 overleaf) First Name Middle Name **Unit Holder** Folio No. Please furnish below PAN of each Applicant. Fulfilment of KYC requirements is mandetory for all investments w.e.f. January 1, 2011. Second Applicant First Applicant Third Applicant Please enclose a copy of KYC Acknowledgement Letter for all applicants to evidence fulfilment of KYC requirements. Please refer General Instructions 4 and 5 and Note 1 of Guidance notes overleaf. (See note 2 overleaf) **PURCHASE REQUEST** Scheme Plan O Dividend Payout Dividend Frequency Option (✓) ○ Growth OR O Dividend Reinvestment DD Charges (If applicable) Net Amount (Cheque/DD Amount) Investment Amount A minus B Rs Rs. Refer note on 3rd party payments overleaf Mode of Payment (✓) ○ Cheque or ○ DD or ○ Fund Transfer or ○ Others Dated DD/MM/YYYY Instrument No. Drawn on Branch NRI Investors, please indicate source of funds for your investment (Please ✓) ONRE O FCNR O NRO O Others REASON FOR INVESTMENT O Child's Education O Child's Marriage Retirement Others Purchase of House Purchase of Car **REDEMPTION REQUEST** (See note 3 overleaf) Scheme Plan Ontion (√) O Growth OR Dividend Dividend Frequency All Units (✓) Amount (Rs.) No. of Units ΛR OR **SWITCH REQUEST** (See note 4 overleaf) From Scheme Plan Option (✓) Dividend Dividend Frequency To Scheme Plan Option (✓) O Growth OR O Dividend Reinvestment OR O Dividend Payout Dividend Frequency Amount (Rs.) No. of Units OR All Units (✓) SYSTEMATIC WITHDRAWAL PLAN (SWP) (To be submitted at least 7 days before the 1st due date for withdrawal) (See note 5 overleaf) Plan Scheme Option (✓) O Growth OR Dividend Dividend Frequency Withdrawal Preference O Fixed Amount OR O Fixed No. of Units Withdrawal From Withdrawal Instalment (First Instalment) (Last Instalment) X No. of Instalments Total Withdrawal Withdrawal Frequency (√) Quarterly Monthly OR SYSTEMATIC TRANSFER PLAN (STP) (To be submitted at least 7 days before the 1st due date for transfer) (See note 6 overleaf) From Scheme Plan Option (√) Growth OR Dividend Dividend Frequency To Scheme Plan O Growth OR O Dividend Reinvestment OR O Dividend Payout Dividend Frequency Option (✓) Transfer Instalment Rs. Transfer Frequency (Please choose either Weekly or Fortnightly or Monthly) (✓) O Weekly (✓) O Mon OR O Tue OR O Wed OR O Thu OR O Fri Total Transfer Rs. (2nd Date will be 1st Date + 15) C Fortnightly Date Transfer Period From M M/YYYY M M/YYY Monthly (First Instalment) (Last Instalment) UNIT HOLDER(S) SIGNATURE(S) (To be signed by ALL UNIT HOLDERS if mode of holding is 'Joint'.) I/We have read and understood the contents of the respective Scheme Information Document, Statement of Additional Information and Key Information Memorandum of Fidelity Mutual Fund. I/We have neither received nor been induced by any rebate or gifts, directly or indirectly in making this transaction. The ARN holder has disclosed to me/us all the commissions (in the form of trail commission or any other mode), payable to him for the different competing schemes of various Mutual Funds from amongst which the Scheme is being recommended to me/us. X X X Sole/First Unit Holder Second Unit Holder Third Unit Holder