

Wealthcare Securities (P) Ltd. (ARN-3511)

Service Request and Transaction Form
this form may be used for all Mutual Funds
Please print this form, fill up and submit at a Service Center

First Holder Name _____ Folio Number _____

Transaction Request

I wish to (Additional Purchase) of Rs. _____ in Scheme _____ Of Bank _____ Cheque No. _____ dated _____ is enclosed.
I wish to (Redeem) Rs. _____ or _____ units from my account in Scheme _____ Of Mutual Fund _____.
I wish to (Switch) Rs. _____ or _____ units from my account in Scheme _____ In to Scheme _____ Of Mutual Fund _____ My folio number is _____.

Change of Address / Bank

Please change my new address / new bank as below in my folio number _____ in
Scheme _____ Of Mutual Fund _____.

New Address		New Bank	
Address1		Bank Name	
Address2		Branch	
Address3		A/C No.	
City		Type	
Pin code		Bank Address	
State		Address2	
Email Address		Pin code	

Signatures _____

Pan No. _____

Holder 1

Holder 2

Holder 3

Declaration

1. 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.
2. The ARN holder has disclosed to me / us all the commission (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.