

* (Please ✓)	DIRECT	
	BROKER/DISTRIBUTOR	
	Prudent CAS Ltd 9992	Sub Broker Name & Code BHAVESH MODH 27030

COMMON TRANSACTION FORM

This Form is to be used by Existing Investors for the purpose of Additional Purchase Redemption Change of Bank Account Change of Address Switch SIP SWP STP Nomination Change of Contact Details (Please ✓ whichever is applicable) * Mandatory

Existing Unitholders Information

First Unitholder Existing Folio No.

Please ensure that all unitholders are KYC compliant in case of investment of Rs. 50,000 and above.

PAN & KYC Details

Sole / First Applicant / Guardian	PAN No.* <input style="width: 150px;" type="text"/>	KYC Compliant# (Please ✓) <input type="checkbox"/> Yes <input type="checkbox"/> No
Second Applicant	PAN No.* <input style="width: 150px;" type="text"/>	KYC Compliant# (Please ✓) <input type="checkbox"/> Yes <input type="checkbox"/> No
Third Applicant	PAN No.* <input style="width: 150px;" type="text"/>	KYC Compliant# (Please ✓) <input type="checkbox"/> Yes <input type="checkbox"/> No

*Mandatory - Please enclose a Certified PAN Card Copy # KYC Mandatory for investment of Rs. 50,000 and above

Additional Purchase

Scheme Name Plan Option

Investment Amount DD Charges (if applicable) Net Amount (Cheque / DD Amount)

Rs. A B Rs. A m i n u s B

Cheque/DD No. Drawn on (Bank / Branch Name)

Cheque / DD Date / / **Account Type** Savings Current NRE NRO FCNR Others Please specify

Systematic Investment Plan (SIP) (Through Post Dated Cheques)

Scheme Name Plan Option

Frequency (Please ✓): Monthly Quarterly SIP Date: 1st 7th 14th 21st All four dates Rs.

Enrolment Period From / To / Cheque No(s). From To No. of Cheques

Drawn on (Bank / Branch Name)

Systematic Transfer Plan (STP)

From Scheme (Transferor) Plan Option

To Scheme (Transferee) Plan Option

Please transfer Fixed Amount Rs. **OR** Capital Appreciation

Frequency: Weekly Monthly Quarterly STP Date: 1st 7th 14th 21st

Enrolment Period From / To /

STP shall not be executed if amount is less than Rs. 1000/-

Switch

From Scheme (Transferor) Plan Option

To Scheme (Transferee) Plan Option

Please transfer Rs. **OR** Units **OR** All Units

Declaration & Signatures

I/We have read and understood the contents of the Offer Document of the above Scheme of AIG Global Investment Group Mutual Fund including the sections on "Who cannot invest" and "Important Note on Anti Money Laundering, Know-Your-Customer and Investor Protection". I/We hereby apply for allotment/ purchase of Units in the Scheme and agree to abide by the terms and conditions applicable thereto. 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 in India. I/ We hereby authorise AIG Global Investment Group Mutual Fund, its Investment Manager and its agents to disclose details of my investment to my bank(s) / AIG Global Investment Group 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.

APPLICABLE FOR NRIs: I/We confirm that I am/ we are Non-Resident(s) of Indian Nationality / Origin and that I/We have remitted funds from abroad through approved banking channels or from funds in my / our NRE / FCNR Account. I/We undertake that all additional purchases made under this folio will also be from funds received from abroad through approved banking channels or from funds in my / our NRE/FCNR Account.

SIGNATURE(S)

Sole / First Applicant / Guardian

Second Applicant

Third Applicant

If the investment is being made by a Constituted Attorney please furnish Name of Power of Attorney Holder (POA) in respect of each applicant below:

Name	<input style="width: 200px;" type="text"/> POA Holder for Applicant 1	<input style="width: 200px;" type="text"/> POA Holder for Applicant 2	<input style="width: 200px;" type="text"/> POA Holder for Applicant 3
Address	<input style="width: 200px;" type="text"/>	<input style="width: 200px;" type="text"/>	<input style="width: 200px;" type="text"/>
PAN No.*	<input style="width: 150px;" type="text"/>	<input style="width: 150px;" type="text"/>	<input style="width: 150px;" type="text"/>
KYC Compliant # (Please ✓)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

*Mandatory - Please enclose a Certified PAN Card Copy # KYC Mandatory for investment of Rs. 50,000 and above

(P. T. O. ☞)

Acknowledgement Slip (To be filled in by the Investor)

Existing Folio No. Date

Received from

SIP: Installment Amount (Rs.) Total Cheques Cheque Nos.

Additional Purchase : Amount (Rs.) Cheque No.

Redemption: Amount (Rs.) OR Units

Switch : Amount (Rs.) OR Units

SWP : Fixed Amount (Rs.) OR Capital Appreciation

STP : Fixed Amount (Rs.) OR Capital Appreciation

Change of Bank Account Change of Address Change of Contact Details Nomination Details

Service Centre
Signature & Stamp

COMMON TRANSACTION FORM

* (Please ✓)	DIRECT	
	BROKER/DISTRIBUTOR	Sub Broker Name & Code
	ARN -	

This Form is to be used by Existing Investors for the purpose of Additional Purchase Redemption Change of Bank Account Change of Address Switch SIP SWP STP Nomination Change of Contact Details (Please ✓ whichever is applicable)

Existing Unitholders Information

First Unitholder Existing Folio No.

Please ensure that all unitholders are KYC compliant in case of investment of Rs. 50,000 and above.

Redemption

Scheme Plan Option

Amount Rs. OR Units OR All units (Please fill any one)

Change of Bank Account (New Bank Account Details)

Account No. Account type (Please ✓) Savings Current NRE NRO FCNR Others Please specify

Bank Name

Branch Address City

MICR Code (9 digit) IFSC Code (11 digit)

Change of Address

New Address Home Office

City State Country Pin/Zip

Tel. (Off.) Tel. (Res.)

Systematic Withdrawal Plan (SWP)

From Scheme Plan Option

(Please ✓) Fixed Amount Rs. OR Capital Appreciation SWP Date : 1st 7th 14th 21st

Enrolment Period From / / To / /

SWP shall not be executed if amount is less than Rs. 1000/-

Change of Contact Details

Update my Mobile No. Update my Email ID

Nomination Details

	Nominee	Name of Guardian (in case of Minor)	Percentage of Investment Allocation %
Nominee 1	<input type="text"/>	<input type="text"/>	<input type="text"/>
Address	<input type="text"/>		
Nominee 2	<input type="text"/>	<input type="text"/>	<input type="text"/>
Address	<input type="text"/>		
Nominee 3	<input type="text"/>	<input type="text"/>	<input type="text"/>
Address	<input type="text"/>		

Declaration & Signatures

I/We have read and understood the contents of the Offer Document of the above Scheme of AIG Global Investment Group Mutual Fund including the sections on "Who cannot invest" and "Important Note on Anti Money Laundering, Know-Your-Customer and Investor Protection". I/We hereby apply for allotment/ purchase of Units in the Scheme and agree to abide by the terms and conditions applicable thereto. 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 in India. I/We hereby authorise AIG Global Investment Group Mutual Fund, its Investment Manager and its agents to disclose details of my investment to my bank(s) / AIG Global Investment Group 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.

APPLICABLE FOR NRIs: I/We confirm that I am/ we are Non-Resident(s) of Indian Nationality / Origin and that I/We have remitted funds from abroad through approved banking channels or from funds in my / our NRE / FCNR Account. I/We undertake that all additional purchases made under this folio will also be from funds received from abroad through approved banking channels or from funds in my / our NRE/FCNR Account.

SIGNATURE(S)

Sole / First Applicant / Guardian

Second Applicant

Third Applicant

If the investment is being made by a Constituted Attorney please furnish Name of Power of Attorney Holder (POA) in respect of each applicant below:

	POA Holder for Applicant 1	POA Holder for Applicant 2	POA Holder for Applicant 3
Name	<input type="text"/>	<input type="text"/>	<input type="text"/>
Address	<input type="text"/>	<input type="text"/>	<input type="text"/>
PAN No.*	<input type="text"/>	<input type="text"/>	<input type="text"/>
KYC Compliant # (Please ✓)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

*Mandatory - Please enclose a Certified PAN Card Copy # KYC Mandatory for investment of Rs. 50,000 and above

Investor Care	1800-425-3444 (MTNL/BSNL); 60003444 (Others) Email: investorcare@aig.com
Distributor Care	60003444 Email: distributorcare@aig.com
SMS	AIGINV to 56767

INSTRUCTIONS FOR COMPLETING THE COMMON TRANSACTION FORM

- The Common Transaction Form is to be used by Existing Investors for the purpose of Additional Purchase, Redemption, Change of Bank Account, Change of Address, Switch, SIP (thru Post Dated Cheques) SWP, STP, Nomination & Change of Contact Details.
- Please mention your folio number, name & put your signature (as per the mode of holding) on the same side where you have filled up the form. In case you have filled up both sides of the Common Transaction Form; you need to sign on both sides of the form.
- Additional purchase/Redemption/Switch - Please ensure that you meet the minimum amount criteria of the Scheme/Plan.
- Redemption & Switch - Please mention either the amount or units for redemption & Switch.
- Change in address* - Please mention the new address
- Change of Bank details - Please mention the new bank details; also attach a copy of cancelled cheque for the new bank mandate.
- Please furnish a certified copy of the PAN Card for all investments.
- Please enclose KYC Acknowledgement Letter of all applicants if investment amount is Rs. 50,000 and above.

*In case of KYC Compliant investors, change of address has to be done first with CDSL, Registrar and Transfer Agent (RTA) will capture the new details from CVL database. This information will not be taken from the application form. These fields cannot be modified by RTA once the unitholder becomes KYC compliant.

COMMON INFORMATION FOR SYSTEMATIC INVESTMENT PLAN (SIP), SYSTEMATIC TRANSFER PLAN (STP) AND SYSTEMATIC WITHDRAWAL PLAN (SWP)

1. Please check for availability of SIP/SWP/STP Facility in the respective Scheme.
2. Minimum Amount for each SIP/STP/SWP is Rs. 1,000/-
3. SIP/STP/SWP Facility is available only on specific dates of the month viz. 1st / 7th / 14th / 21st / All four dates.
4. In case of ambiguity in the SIP/STP/SWP dates in the application form, then 7th will be treated as default option date.
5. Existing Investors are required to submit only the Common Transaction Form indicating the existing Folio Number and investment details in the SIP/STP/SWP section.
6. You can choose to discontinue any of this facility by giving 15 days written notice to the Registrar.
7. If you are a new investor, investing in a Scheme / Plan using the Systematic Investment Plan/Systematic Transfer Plan/Systematic Withdrawal Plan, please fill in all the sections in the Common Application Form except the section titled "Investment & Payment Details".
The investment details must be indicated in the SIP/STP/SWP Section of the Common Transaction Form.
8. Please furnish a certified copy of the PAN Card along with the Application Form/Transaction Form.

INSTRUCTIONS FOR SYSTEMATIC INVESTMENT PLAN (SIP)

1. All Cheques should be of the same date of month / quarter and of the same amount.
2. You can opt for SIP in the Scheme on a monthly / quarterly basis by issuing post-dated cheques for a pre-defined amount.
3. In case "All four dates" is selected, minimum 6 cheques for each date should be given i.e. minimum 24 cheques should be given.
4. The Cheque should be drawn in favour of "Scheme Name" as applicable.
5. A separate SIP Form must be filled for each Scheme / Plan. Please mention your folio number and name on reverse of the Cheque.

INSTRUCTIONS FOR SYSTEMATIC WITHDRAWAL PLAN (SWP)

1. Please allow upto 5 working days for SWP to be registered and first SWP transaction to happen. Hence form should be submitted atleast 5 working days before SWP start date.
2. You can opt for SWP for a fixed amount or appreciation.
3. For investors availing the withdrawal of 'appreciation' option, where in any month, there is no appreciation or the appreciation is less than Rs. 1,000/-, withdrawal as mentioned above, will not be carried out. Even if withdrawal is not carried out due to lack of appreciation, the SWP will be terminated at the end of the specified period.

INSTRUCTIONS FOR SYSTEMATIC TRANSFER PLAN (STP)

1. Please allow upto 5 working days for STP to be registered and first STP transaction to happen. Hence form should be submitted atleast 5 working days before STP start date.
2. The unitholder has to fulfill the following criteria in order to avail of the Systematic Transfer Plan -
 - a) A Unit Holder has to have a minimum balance of Rs. 25,000/- in a Liquid scheme or
 - b) Rs 10000 in a non-liquid scheme (in a particular folio) or
 - c) the minimum amount as stated in the offer document of the respective transferor scheme, whichever is higher.
3. You can opt for STP for a fixed amount or appreciation on a weekly (on all four STP dates) / fortnightly / monthly basis. In case of ambiguity / incomplete form, monthly option will be treated as default option.
4. STP has to be for minimum of SIX transactions / transfers irrespective of frequency.
5. For investors availing the transfer of 'appreciation' option, where in any week, month or quarter, there is no appreciation or the appreciation is less than Rs. 1,000/-, switch as mentioned above, will not be carried out. Even if transfer is not carried out due to lack of appreciation, the STP will be terminated at the end of the specified period.

Investor Care 1800-425-3444 (MTNL/BSNL); 60003444 (Others) **Email:** investorcare@aig.com

Distributor Care 60000344 **Email:** distributorcare@aig.com

SMS AIGINV to 56767