eMutualFunds

Binod Kumar Shukla · AMFI Registered Mutual Fund Distributor

NACH / OTM MANDATE

Universal · AMC-neutral

DISTRIBUTOR DETAILS (PRE-FILLED)

ARN: **ARN-50844** Distributor: **Binod Kumar Shukla** EUIN: _____

1. MANDATE TYPE

☐ Create ☐ Modify ☐ Cancel

AMC / Mutual Fund *

UMRN (for modify/cancel)

2. BANK ACCOUNT TO BE DEBITED

Bank Name *

Account Type (SB/CA/CC)

Account Number *

IFSC *

3. DEBIT INSTRUCTION

Maximum Amount (Rs.) *

Frequency (Monthly / As & when)

Mandate Valid From

Valid To (or Until Cancelled)

4. ACCOUNT HOLDER

Account Holder Name *

PAN

Mobile

Email

IMPORTANT — PLEASE READ

This is an information-collection form prepared by the distributor to assist processing. It is NOT an official AMC form and does not replace it. Final submission may require the selected AMC/RTA's official form. Mutual fund investments are subject to market risks; read all scheme related documents carefully.

Date & Place

Signature of Applicant