

Franklin Templeton Mutual Fund

Common Transaction Form

Broker Name & Code*	Sub Broker Name & Code*
1386	
* AMFI Registered Distributors	

This Form is for use of Existing Investors only. Use this Form for • ADDITIONAL PURCHASE • REDEMPTION • SWITCH • DIRECT CREDIT • CHANGE OF ADDRESS / BANK DETAILS • E-MAIL COMMUNICATIONS • Online Account Access • SIP/SWP/STP/DTP • NOMINATION DETAILS

Please use separate Transactions Form for each Scheme / Plan and Transaction.

EUIN- E031313

Existing Unitholder Information

Name of Sole / First Accountholder (Leave space between first/middle/last name) _____ Customer Folio No. _____
 _____ Account No. _____

Additional Purchase Order

Scheme _____ Plan _____ Option _____ Account No. _____
 Amount (in figures) _____ Amount (in words) (Favouring scheme name is enclosed) _____
 Cheque/Draft No. _____ Cheque/Draft Dated _____ Drawn on (Name of Bank and Branch) _____

PAN - Mandatory for all Resident Investors regardless of mode of holding and required for transactions of Rs. 50,000 & above

Sole/First Applicant/Guardian _____ Second Applicant _____ Third Applicant _____
 PAN _____
 Enclosed: PAN Card Copy OR Form 60/61 PAN Card Copy OR Form 60/61 PAN Card Copy OR Form 60/61
 Mandatory Enclosures: PAN Card Copy or Form 60 /61 with address proof. Transactions not including these mandatory enclosures may be rejected

Redemption

Scheme _____ Account No. _____
 Please redeem my/our Franklin Templeton units as per following details.
 Amount (in figures) _____
 Amount (in words) _____
 Units (in figures) _____
 Units (in words) _____

Please fill any one i.e. either Amount or number of Units.

For Liquid Fund Redemption

Redemption for Previous Day NAV (T+0)

Change of Bank Account

Scheme _____ Account No. _____ All Schemes
 Bank Account Number _____
 Account type Savings Current NRO NRE Others _____
 Bank Name _____
 Bank Branch _____
 _____ City _____

Direct Credit Facility is available with the following banks: ABN Amro Bank, Citibank, Centurian Bank, Development Credit Bank, HDFC Bank, HSBC Bank, IDBI Bank, ICICI Bank, UTI Bank, Kotak Mahindra Bank, Standard Chartered Bank and YES Bank. Dividend and redemption payments will be directly credited to your account if the bank mandate registered for your account is one of the above said banks. I/We DO NOT wish to avail direct credit facility (Please tick)

Please verify and ensure the accuracy of the bank details provided above and as shown in your account statement. Franklin Templeton cannot be held responsible for delays or errors in processing your request if the information provided is incomplete or inaccurate.

Change of Address

New Address _____ Following is Home Office Address

 _____ City _____
 Country _____ Pin Code _____
 Office Tel. _____ Resi. Tel. _____
 My Email ID _____

Declaration

Having read and understood the contents of the Offer Document of the Scheme, the Key Information Memorandum and the Addenda issued till date, I / We hereby apply to the Trustees of Franklin Templeton Mutual Fund for units of Franklin Templeton Mutual Fund as indicated above, and agree to abide by the terms, conditions, rules and regulations of the Scheme as on the date of this investment and confirm that the monies invested in the scheme legally belong to me / us. I / We have not received nor been induced by any rebate or gifts, directly or indirectly in making this investment.

* I / We confirm that I am / we are Non-Resident Indians / Persons of Indian Origin but not United States persons within the meaning of Regulation (S) under the United States Securities Act of 1933, as amended from time to time, and I / We hereby further confirm that the monies are remitted from abroad through approved banking channels or from my/our monies in my/our NRE/NRO/FCNR Account.

I/We hereby declare that all the particulars given herein are true, correct and complete to the best of my/our knowledge and belief. I further agree not to hold Franklin Templeton Investments liable for any consequences in case of any of the above particulars being false, incorrect or incomplete.

Sole/First Holder/Guardian _____
 Second Holder _____
 Third Holder _____
 Date: _____ * Applicable to Non Resident Investors

Acknowledgement Slip (To be filled in by the Investor)

Customer Folio _____ Date _____
 Received from _____
 Additional Purchase or SIP : Total Amount (Rs.) _____ Total Cheque(s) _____ Cheque No.(s) _____
 Redemption or Switch: Amount (Rs.) _____ OR Units _____
 SWP STP DTP Change of Bank Account Change of Address Nomination Details

Service Centre
Signature & Stamp

Existing Unitholder Information

Name of Sole / First Accountholder (Leave space between first/middle/last name)

Salutation Mr. Ms. Dr. Prof.

Customer Folio

Systematic Investment Plan (SIP)

Scheme _____ Plan _____ Option _____ Account No. _____

Frequency Monthly Quarterly; Date 1st 7th 10th 20th 25th Monthly/Quarterly Amount _____

Enrolment Period From ____/____ (mm/yy) To ____/____ (mm/yy) Cheque No(s). From _____ To _____ No. of Cheques _____

Drawn on Bank /Branch _____

City _____

Systematic Withdrawal Plan (SWP) (See instruction 7, 13)

Scheme Name _____ Plan _____ Option _____

Account No. _____

Frequency Monthly Quarterly

Fixed Amount Rs. _____ OR Capital Appreciation

15th Last business day of month (Applicable for fixed amount)

Enrolment Period From ____/____ (mm/yy) To ____/____ (mm/yy)

Switch

Scheme Name _____ Plan _____ Option _____

Account No. _____

Please transfer ____ units or Rs. _____ to (Destination scheme name) _____ Destination Scheme

Account No (if available) _____

Plan/Option _____ Others Specify _____

Systematic Transfer Plan (STP)

Scheme Name _____ Plan _____ Option _____

Account No. _____

Please transfer Fixed Amount Rs. _____ OR

Capital Appreciation

to (Destination scheme name) _____ Destination

Scheme Account No (if available) _____

Plan/Option _____ Others Specify _____

Frequency Weekly Monthly Quarterly

Weekly 7 14 21 28 Monthly/Quarterly Specify date _____

Enrolment Period From ____/____/____ (dd/mm/yy) To ____/____/____ (dd/mm/yy)

Nomination Details

Scheme _____ Account No. _____ All Schemes

Nominee Name & Address _____ Signature _____

If nominee is a minor Date of Birth of nominee

D D M M Y Y Y Y

Guardian Name & Address _____ Signature _____

Dividend Transfer Plan (DTP) (See instruction 9, 13)

Scheme Name _____ Plan _____ Option _____

Account No. _____

I/We would like to transfer Dividend to the following:

New Scheme Name/Plan/Option Existing Account No., if any in this scheme

E-Mail Communication and Online Account Access

I wish to receive the following via e-mail instead of physical document (please)

Account Statement Quarterly Review & Annual Report Daily NAV

My Email ID _____

Online Account Access

I wish to avail the online account access facility (email address mandatory) Yes No

Signatures(s) (Please read the instructions given for guidance)

Having read and understood the contents of the Offer Document of the Scheme, the Key Information Memorandum and the Addenda issued till date, I / We hereby apply to the Trustees of Franklin Templeton Mutual Fund for units of Franklin Templeton Mutual Fund as indicated above, and agree to abide by the terms, conditions, rules and regulations of the Scheme as on the date of this investment and confirm that the monies invested in the scheme legally belong to me / us. I / We have not received nor been induced by any rebate or gifts, directly or indirectly in making this investment.

* I / We confirm that I am / we are Non-Resident Indians / Persons of Indian Origin but not United States persons within the meaning of Regulation (S) under the United States Securities Act of 1933, as amended from time to time, and I / We hereby further confirm that the monies are remitted from abroad through approved banking channels or from my/our monies in my/our NRE/NRO/FCNR Account.

I/We hereby declare that all the particulars given herein are true, correct and complete to the best of my/our knowledge and belief. I further agree not to hold Franklin Templeton Investments liable for any consequences in case of any of the above particulars being false, incorrect or incomplete.

Sole/First Holder/Guardian _____

Second Holder _____

Third Holder _____

Date: _____ * Applicable to Non Resident Investors



FRANKLIN TEMPLETON INVESTOR SERVICE CENTRES: Ahmedabad: Tel: 26470057. Fax: (079) 26462685; Bangalore: Tel: 22385612/13/14. Fax: (080) 22385886 Baroda: Tel: 2356036. Telefax: (0265) 2353038; Bhubaneswar: Tel: 2535141, 2531745. Fax: (0674) 2531026; Chandigarh: Tel: 2662136. Fax: (0172) 2622341 Chennai: Tel: 24679200-20. Fax: (044) 24987790 Cochin: Tel: 2370380, 2373078. Fax: (0484) 2373076 Coimbatore: Tel: 2474616. Telefax: (0422) 2470277 Dehradun: Tel: 2743268/2748306. Fax: (0135) 2748306 Hyderabad: Tel: 55665915 / 55665916. Fax: (040) 55665770; Indore: Tel: 2436324. Telefax: (0731) 2436324 Jaipur: Tel: (0141) 2377904, 2377905. Fax: (0141) 2388737; Jalandhar: Tel: 5080784, 2456033. Telefax: (0181) 5080783; Kanpur: Tel: (0512) 2303131. Fax: (0512) 2330767; Kolkata: Tel: 22826517, 22824171. Fax: (033) 22826459; Lucknow: Tel: 2285301. Telefax: (0522) 2285172 Ludhiana: Tel: 2406198. Telefax: (0161) 2406191; Madurai: Tel: (0452) 2343008, 2350144; Mangalore: Tel: 2492796. Telefax: (0824) 2493749; Mumbai: Tel: 56325820-29, 56325830-36. Fax: (022) 22810923 Nagpur: Tel: 2555074. Telefax: (0712) 2553794; Nasik: Tel: 2574329. Telefax: (0253) 2574327 New Delhi: Tel: 23722786, 23752017. Telefax: (011) 23353213; 23730627 Patna: Tel: 2212277. Fax: (0612) 2201762 Pune: Tel: 56033511/12/14. Telefax: (020) 56033522 Rajkot: Tel: 2471395. Telefax: (0281) 2294204 Raipur: Tel: 5033244. Telefax: (0771) 5033614 Salem: Tel: 2446854, 2430506. Fax: (0427) 2446854 Surat: Tel: 2473766. Telefax: (0261) 2473744 Trichy: Tel: 2464022. Fax: (0431) 2414691 Varanasi: Tel: 2226684. Telefax: (0542) 2226245; Vijayawada: Tel: 2472594, 5561301. Fax: (0866) 472594; Visakhapatnam: Tel: 5565351, 2704705. Fax: (0891) 5566806