

TRANSACTION SLIP

Upfront commission shall be paid directly by the investor to the AMFI registered Distributors based on the investors' assessment of various factors including the service rendered by the distributor.

AMC: _____

ARN:
EUIN:E

I/We hereby confirm that the EUIN box has been intentionally left blank by me/us as this is an "execution-only" transaction without any interaction or advice by the employee/relationship manager/sales person of the above distributor or notwithstanding the advice of in-appropriateness, if any, provided by the employee/relationship manager/sales person of the distributor and the distributor has not charges any advisor fees on this transaction.



First Holder



Second Holder



Third Holder

Date: ___/___/20__

Folio Number: _____

First Holder: _____	PAN _____
Second Holder: _____	PAN _____
Third Holder: _____	PAN _____

Additional Purchase Request

Scheme: _____	Option: _____
Rs. _____ (In Words _____)	
Bank: _____	Branch: _____
Cheque No: _____	Date: ___/___/20__ MICR _____ IFSC Code _____

Switch Request

From Scheme: _____	Option: _____
To Scheme: _____	Option: _____
Amount: Rs. _____	Units: _____ or ALL Units <input type="checkbox"/>

Redemption Request

From Scheme: _____	Option: _____
Amount: Rs. _____	Units: _____ or ALL Units <input type="checkbox"/>

Change of Bank Request

Bank Name: _____	Branch: _____
A/C No. _____	<input type="checkbox"/> Savings <input type="checkbox"/> Current MICR _____ IFSC _____

I / We have read, understood Statement of Additional Information (SAI), Scheme Information Document (SID) and Key Information Memorandum (KIM) and all scheme related documents of Tata Dividend Yield Fund and hereby agree to comply with the terms and conditions of the said scheme.



First Holder



Second Holder



Third Holder

Acknowledgement Slip

Transaction Type	AMC _____	Folio No. _____
<input type="checkbox"/> Additional Purchase	Investor Name _____	
<input type="checkbox"/> Redemption	Scheme Name _____	Option _____
<input type="checkbox"/> Switch	Amount Rs. _____	Bank Name: _____ Branch: _____
<input type="checkbox"/> Change of Bank	Cheque No. _____	Date: / /20__ MICR _____ IFSC _____