Sl. No.



	Investment Pl		to Debit (See instruction	ons overleaf)	FRANKLIN TEMPLETON INVESTMENTS
Distributor inform Advisor ARN	Sub-broker/Branch Co	ode Sub-broker ARN	Representative EUIN	investor, if any, shal registered distribute the investor's asses	nission on investment made by the long paid to the ARN Holder (AMF or) directly by the investor, based on the ARN Holder including the ARN Holder.
We hereby confirm the son of the above distrib	at the EUIN box has been int butor/sub broker or notwithsta	entionally left blank by me/us a nding the advice of in-appropria	this transaction is executed with teness, if any, provided by the empl	 service rendered by t 	he ARN Holder. e by the employee/relationship manager/sal ales person of the distributor/sub broker."
ature of the Investo			_ 2	3. —	
licable for transacti			opted to receive transaction cha	rges. mutual funds investor (Rs	:.100 will be deducted).
e of Sole/First Accoun	Number		Account No.		
	complete and submit a Commo		Regn. No	Micro SIP □ (For Micro SI	(For office use only) P, Please provide required proof /documentation
me					
SIP Cheque Date Period Start Dat	Iment)	Cheque No.	Any other amount n Templeton Mutual Fund to d same would be considered as 31st December,	Frequency Mo	onthly (Default) SIP Date
			od and installments, please refer Terms service providers to Debit my/our accor a case the payment isn't processed throu ove mentioned account.		(If 1st installment is not by cheque)
	Auto Debit Form (ADF) is a	ttached and to be registered in the	please mention Bank Name and Acco Folio. SIP Auto Debit will start after r nentioned in the ADF already register	nandate registration which tak	
entification document	Micro SIP (Please provide any one c	of the name of identification document as n Field Issuing Authority	,	ocument Identification No.	
epository Account	Details	Ticid issuing ruthority	D(Seament recitification 140.	
read and understood tite and investment h er the United States Se emitted from abroad the missions (in the form o orise Franklin Templet us, to any of the Autho orities and other invest nection with this applic egate investments exceed to be incomplete in a ro investment route will	heli. I we commit make the dube the terms and features of the sci orizon. "I/We confirm that I am/ ceurities Act of 1933, or as defined the provided approved banking channels of trail commission or any other me on Investments to disclose, share, a prised Parties or any Indian or foreign again agencies without any obligation. "I/We confirm that I/we deding Rs.50,000/- in a year. Furthen yr respect or not supported by ade the cancelled for future instalments."	herested legally belong to fine the sand heme(s) and associated risk factors we are Non-resident Indians/ Persc I by the U.S. Commodity Futures I s or from my/our funds in my/our d dole, payable to him for the different remit in any form, mode or manner, s ign governmental or statutory or jud ation of advising me/us of the same, do not have any other existing inve- ted not have any other existing inve- ted the state of the same, and the same was the same quate documentation or if the existing and no refund shall be made for the	and have satisfied myself/ourselves alons of Indian Origin/ Qualified Foreignading Commission, as amended from tomestic account maintained in accordation competing schemes of various mutual full/any of the information provided by licial authorities/agencies including but I hereby agree to provide any addition stiment in the schemes of Franklin Tem case Franklin Tem of the provide any addition and agagregate investment together with the units already allotted.	oduced by any review of Biss. Scheme(s in Investors but not United Stat in time to time or residents of C nee with applicable RBI guidelin unds from anongst which the Sch me/us, including all changes, upo not limited to the Financial Int all information / documentation pipeton Mutual Fund which tog processes this investment / first its proposed investment exceeds	iment (SID) and Key Information Memorandum of Systematic Investment Plan (SIP) & NACH as are that the particulars given above are correct and on Investments, its employees, agents, authorised iately. I/We have read and agreed to the terms and settly or indirectly in making this investment. I/We lot or my/our investment in light of my/our risk ese persons within the meaning of Regulation(S) anada and that I/we hereby confirm that the funds earlier of the control of th
pplicable to NRI / PIO	/ QFI ** Applicable to Micro-in Signature of the Investor(s)	ivestments	2		3
	r investments will make it easier fo	or you to invest with Franklin Temp	leton Mutual Fund (FTMF) in the futu		nother mandate, you can select 'As & when present action will be debited from your account.
		SIP	Auto Debit Form		ADF
NKLIN TEMPLETON INVESTMENTS	UMRN Sponsor Bank Code	F o r o For Office Use	f f i c e u Utility Coo	s e	Date For Office Use
EATE 2			·	to debit (tick √)	SB CA CC SB-NRE SB-NRO Othe
DIFY 1/ we nero	ank a/c number	Franklin Templeton Mu	ituai Punu		
Bank	Name of Customer	s bank II	FSC	6 or M	ICR
nount of Rupees					₹
QUENCY Mtl	aly Qylt M-Yrly	⊠ Yrly ☐ As & when	presented ⁸ D	EBIT TYPE Fixed Amo	ount
rence 1		Folio Number		Phone No.	
erence 2		Application Number		Email ID	. 1 111 (1 (1
n IOD	14	I agree for the debit of mandate p bank.	orocessing charges by the bank whor	n I am authorizing to debit my	v account as per latest schedule of charges of tl
☐ Until Can	ucelled	Signature Primary Acco	unt holder Signatur	e of Account holder	Signature of Account holder
□ Ontil Can	icencu	1. Name as in Bank re	ecords 2. Name	as in Bank records	3. Name as in Bank records

This is to confirm that the declaration has been carefully read, understood & made by me/us. I/We also confirm that I/we have carefully read, understood and agree to abide by the Terms and conditions and instructions. I am authorizing Franklin Templeton to debit my account. I/We have understood that I/We am/are authorized to cancel/amend this mandate by appropriately communicating the cancellation/amendment request to Franklin Templeton or the bank where I have authorized the debit'

Acknowledgement Slip for SIP through Auto Debit (To be filled in by investor)							
Investor's Name		Franklin Templeton Investor					
Customer Folio	Account No	Service Centre Signature & Stamp					
SIP Amount (Rs.)	Frequency: Monthly Quarterly Scheme:						