



Statement Date : 1/30/2015 12:00:00 AM

Statement Period : From 15-Jan-2016 To 15-Jan-2016

Page 1 of 2

Folio No. : 10000092

L\$10000092\$ACT\$311218

Hwpznagaykzc

Address1 of Folio: 10000092

Address2 of Folio: 10000092

Address3 of Folio: 10000092

BHUBANESWAR - 751015

ODISHA, INDIA

Tel. : N.A

Mobile No. : 9876543210

E-mail ID : kannanc@sterlingsoftware.co.in

Bank Details : SB / 60000207111111 / Union Bank of India /  
Chandrasekharapur / Bhubaneswar

IFSC Code/MICR No : HDFC0000082

Tax Status : NRI-HUF(NRE)

Mode of Payout : Kotak Direct Credit

Mode of Holding : Single

Adviser :

	First Holder
PAN	ALJPN1445J
KYC	Failed
FATCA	Not applicable
CKYC No.	Not Available
AADHAR	Not Available

\* Cost of investment is inclusive of Dividend amount transferred from other schemes.

\*\* Dividend Paid is inclusive of Dividend amount transferred to other schemes.

Nomination in an individual folio helps in seamless transfer of units in case of an unforeseen event. This facility is available free of cost.

## EFGR / INF582M01BY3 / Union KBC Equity Fund Growth

Date	Transaction Type	Amount (INR)	NAV(INR)	Price (INR)	No. of Units	Balance Units
Opening Balance as on 15/01/2016						2,408.508
15/01/2016	Systematic Purchase - Instalment 19/241(NAV DT : 15/01/2016)		13.66	13.66	146.413	2,554.921

Current Load Structure: Entry Load: Nil Exit Load: Nil

\* The Face Value (FV) of units of Union KBC Liquid Fund has been changed from 10/- to 1,000/- w.e.f. October 2, 2011. Accordingly, the NAV per unit has been reset to reflect the change in FV and the balance unit holding has been reduced proportionately. This change will not have any impact on the existing value of investments in Union KBC Liquid Fund.

Units Under Lien : 0

Name Of Financier : N.A

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Page 2 of 2

**COMMON TRANSACTION SLIP** (For existing Unitholders only)

ADVISER CODE (ARN CODE) UBI552321	SUB BROKER ARN CODE	Employee Unique Identification No.(EUIIN)	SUB-BROKER CODE (As allotted by ARN holder)	Agent/Advisor Name and Mobile No Union Bank of India - NAYAPALLI
Upfront commission shall be paid directly by the investor to the AMFI registered Distributors based on the investor's assessment of various factors including the service rendered by the distributor.				
Declaration for "execution-only" transaction (only where EUIIN box is left blank) I/We hereby confirm that the EUIIN 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 charged any advisory fees on this transaction.				
Signature of Sole/First Holder		Signature of Second Holder		Signature of Third Holder

FOLIO NO.(Mandatory) : 10000092

TAX STATUS : NRI-HUF(NRE)

MODE OF HOLDING : Single

1st Holder (Mandatory)	Hwpznagaykzc	ALJPN1445J	Failed
2nd Holder	NA	NA*	NA
3rd Holder	NA	NA	NA

\* PAN & KYC are mandatory for all applicants including NRIs. In case there is any changes in your KYC information please update the same by using the prescribed 'KYC change request form' available on our website www.iciciprumsf.com under downloads section, and submit the same at the point of service of any KYC registration Agency.

Contact details of First/Sole applicant	Mobile Number		and/or Land Line Number	
	E-mail address			

<input type="checkbox"/> <b>Additional Purchase Request</b> (Cheque/DD to be drawn in favour of "Name of the Scheme"). In case you do not mention Plan and/or Option units will be allotted under default option as per respective scheme information documents.				
Scheme Name		PLAN:		OPTION:
Cheque / DD No.		Drawn on Bank Name & Branch		
Cheque / DD Date	D D M M Y Y Y Y	Amount of cheque/DD in figures (Rs.)	DD charges, if any. Rs. (in figures)	
Bank A/c No.		Account Type	<input type="checkbox"/> Current <input type="checkbox"/> Savings <input type="checkbox"/> NRO <input type="checkbox"/> NRE <input type="checkbox"/> FCNR <input type="checkbox"/> Others (Please specify)	
Documents attached to avoid Third Party Payment Rejection where applicable: <input type="checkbox"/> Bank Certificate - for DD <input type="checkbox"/> Third Party Declaration For third party investment/pre-funded instrument, please fill in a separate declaration form as available with AMC.		In case, the additional purchase amount ₹10,000 or above and distributor has opted to receive transaction charges, ₹100/- will be deducted from the Purchase amount and paid to the distributor. Units shall be allotted for the balance amount only.		

<input type="checkbox"/> <b>Redemption Request</b> (For details, please refer to the SID of the Scheme)	I wish to redeem : Rs.	or	Units
From(Scheme, Plan & Option)	To(Scheme, Plan & Option)		

<input type="checkbox"/> <b>Switch Request</b> (Please refer to the SID of the scheme)	I wish to switch : Rs.	or	Units
From(Scheme, Plan & Option)	To(Scheme, Plan & Option)		

If you have registered for multiple bank account facility in the above folio please specify the bank details in which you wish to receive the redemption proceeds. The bank account should be one of the registered bank account in the folio else the payout will be released to the default bank account registered for the folio.

Bank Name	Bank A/c No.
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**YOUR CONFIRMATION/DECLARATION:** I/We have read and understood the contents of the Scheme Information Document(s)/Key Information Memorandum(s) & Statement of Additional Information(s) of the Scheme(s) and agree to abide by the terms, conditions, rules and regulations of the Scheme(s) as on the date of this transaction. The ARN holder has disclosed to me/us all the commissions (in the form of trail commission or any other mode), payable to him for the different competing Schemes of various Mutual Funds from amongst which the Scheme is being recommended to me/us. I/We hereby confirm that I/we have not been offered/communicated any indicative portfolio and/or any indicative yield for this investment.

Signature(s) (To be signed as per Mode of Holding) First Holder Second Holder Third Holder

**ICICI Prudential Asset Management Company Limited**

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**Contact us** : Customer Care Helpline at 1800 222 999 (from MTNL/BSNL) or 1800 200 6666 (Non- MTNL/BSNL) from 8 am to 8 pm from Mon to Sat or Email us at enquiry@icicipruamc.com