

Folio No. :

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L\$10000092\$ACT\$311218

Bank Details :

IFSC Code/MICR No. :

Single

Nominee Name	Percentage

	First Holder		Third Holder
KYC			
FATCA			
CKYC No.			
AADHAR			

Scheme Code / Name	NAV	NAV as of 31st Jan 2018	Unit Balance				
	18.170		2,109.995	39,900.00	0.000	0.00	38,338.61
	13.660		2,554.921	39,400.00	0.000	0.00	34,900.22

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

Sum assured amount and nominee details for insurance mentioned hereby subject to the final consent of the insurer. In case of any discrepancy/dispute, the decision of the insurer will be final.

Date	Transaction Type	Amount (INR)	NAV(INR)	Price (INR)	No. of Units	Balance Units
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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.

Date	Transaction Type	Amount (INR)	NAV(INR)	Price (INR)	No. of Units	Balance Units
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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.

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COMMON TRANSACTION SLIP (For existing Unitholders only)

ADVISER CODE (ARN CODE)	SUB BROKER ARN CODE	Employee Unique Identification No.(EUIIN)	SUB-BROKER CODE (As allotted by ARN holder)	Agent/Advisor Name and Mobile No
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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
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FOLIO NO.(Mandatory) :

TAX STATUS : NRI-HUF(NRE)

MODE OF HOLDING : Single

1st Holder (Mandatory)	Name of the Unit holder(s)	PAN*	KYC Status*
3rd Holder			

* 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.iciciprnf.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
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<input type="checkbox"/> Additional Purchase Request (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	Amount of cheque/DD in figures (Rs.)
Bank A/c No.	DD charges, if any, Rs. (in figures)
Account Type	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"/> Redemption Request (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"/> Switch Request (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
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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

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