

Key Partner / Agent Information (Investors applying under Direct Plan must mention "Direct" in ARN No. column.)

Distributor / Broker ARN ARN - 1678	Sub-Broker ARN Code ARN -	Employee Unique Identification No. (EUIIN) E087722 (Of Individual ARN holder or Of employee Relationship Manager/Sales Person of the Distributor)	Registered Investment Advisor Code
Folio No	Name of Sole / First Holder	D D M M Y Y Y Y	

I/We hereby confirm that the EUIIN box has been intentionally left blank by me/us as this transaction is executed without any interaction or advice by the employee/relationship manager/sales person of the above distributor/sub broker or notwithstanding the advice of in-appropriateness, if any, provided by the employee/relationship manager/sales person of the distributor/sub broker.

Sign Here Sole/First Applicant/Guardian	Sign Here Second Applicant	Sign Here Third Applicant
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Upfront commission, if any, 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. For details on transaction charges payable to distributors; please refer to Key Information Memorandum

- Country of Birth / Citizenship / Nationality or Tax Residency, other than India, for any applicant? (I): Yes / No (Mandatory to I). If yes, please fill FATCA declaration.
- NRI investors should mandatorily fill separate FATCA / CRS declarations.
- Non Individual investors should mandatorily fill separate FATCA / CRS & UBO declarations

1. Additional Purchase (Cheque / DD should be drawn in favor of the Scheme. Investors applying under direct plan must mention "Direct" in the box provided below)

Scheme Invesco India	Plan	Option	Dividend Frequency
Investment Amount (₹)	Investment Amount (₹)	Dated	D D M M Y Y Y Y
Payment Mode <input type="checkbox"/> Cheque/ <input type="checkbox"/> DD/ <input type="checkbox"/> RTGS/ <input type="checkbox"/> NEFT/ <input type="checkbox"/> NACH (Please I)	Drawn on Bank		
Cheque/DD/RTGS/NEFT UTR No./UMRN	A/c Type <input type="checkbox"/> Savings <input type="checkbox"/> Current <input type="checkbox"/> NRO <input type="checkbox"/> NRE <input type="checkbox"/> FCNR <input type="checkbox"/> SNRR <input type="checkbox"/> Others		
Bank A/c. No.	<input type="checkbox"/> Minor <input type="checkbox"/> Client <input type="checkbox"/> Employee <input type="checkbox"/> Distributor		
Applicable in case of Third Party Payment: Payment on behalf of (Please I)	Enclosed (Please I) <input type="checkbox"/> KYC Compliance Proof PAN/KRN		
Name of the Person making Payment	D D M M Y Y Y Y		

2. Switch Request

From : Scheme Invesco India	Plan	Option	Dividend Frequency
To : Scheme Invesco India	Plan	Option	Dividend Frequency
Amount (₹)	Or No. of Units	Or All Units <input type="checkbox"/> (Please I)	

3. Redemption Request

Scheme Invesco India	Plan	Option	Dividend Frequency
Amount (₹)	Or No. of Units	Or All Units <input type="checkbox"/> (Please I)	

For investors who have registered for multiple Bank A/c facility. Kindly credit / issue cheque for the redemption proceeds in the following Bank A/c registered with you.

Bank Name	Bank A/c No.	Branch
Bank City	Account Type	IFSC Code

Disclaimer: If the Banks A/c details mentioned above does not match with the registered Bank A/c details in the folio or not mentioned above then the payment will be remitted in the default Bank A/c.

Demat Account Detail (Optional) (Please I) NSDL CDSL

DP ID ¹	Beneficiary Account No.	DP Name
I N		
The investor shall receive payments of Dividend / Redemption proceeds in the Bank A/c linked to the Demat A/c as mentioned above.		
PAN / KRN (Mandatory)	Enclosed (Please I) <input type="checkbox"/> KYC Compliance Proof	Enclosed (Please I) <input type="checkbox"/> KYC Compliance Proof
	Enclosed (Please I) <input type="checkbox"/> Banker Certificate for DD	Enclosed (Please I) <input type="checkbox"/> KYC Compliance Proof

Declaration: Having read and understood the contents of the Statement of Additional Information / Scheme Information Document(s) and Key Information Memorandum(s) of the respective schemes, I / We hereby apply to the Trustees of Invesco Mutual Fund for units of the Scheme / Option as indicated above and agree to abide by the terms, conditions, rules and regulations of the Scheme. I / We have understood the details of the Scheme and I / We have not received nor have been induced by any rebate or gifts, directly or indirectly, in making this investment.

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To be signed by unitholders as per mode of holding opted. Please strike off section(s) that are not filled by you, to avoid unauthorised use.

Acknowledgement

Folio No.	Name	For Office Use Signature of receiving authority
Redemption Request Invesco India	Units or Amount in `	
Additional Purchase Invesco India	Amount in `	
Cheque / DD / RTGS / NEFT UTR No. / UMRN	D D M M Y Y Y Y	
From: Scheme Invesco India	Plan Option	
To: Scheme Invesco India	Plan Option	
Amount (₹)	Or No. of Units	Date of receipt / Time of receipt :
	Or All Units <input type="checkbox"/> (Please I)	