

6. UNITS IN DEMAT MODE (Please ✓) ■ NSDL ■ CDSL

DP ID																Beneficiary Account No./Client ID															
DP Name																															

Note : Please attach the depository transaction statement or DP master data indicating the DP account number of the applicant. Please ensure that sequence of names as mention in the Application Form match with that of the account held with the DP.

7. POWER OF ATTORNEY (POA)

POA Name																															
PAN																KYC <input type="checkbox"/> Yes <input type="checkbox"/> No - if investment is being made by a constitutional Attorney, please submit the notarized copy of the POA															

8. INVESTMENT DETAILS AND PAYMENT DETAILS-Cheque/DD/RTGS/NEFT/Transfer (outstation cheques will be rejected) Please ✓ wherever applicable.

Scheme Name : SHRIRAM EQUITY AND DEBT OPPORTUNITIES FUND

Plan : Regular * Direct

Option : * Growth Dividend

Mode of dividend : Payout * Re-investment

* Default Plan / option / mode of dividend. Please refer to Item 7 of of page 7.

Investment Amount (Rs.)	DD Charges if any (Rs.)	Net Amount (in words)
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Mode of Payment (Please ✓)

Cheque DD Funds Transfer RTGS/NEFT

Rs. (amt. in Rs.) _____ (in words) _____

Drawn on Bank																																								
Branch & City																Account No.																								
Cheque / DD No.																Date	D	D	M	M	Y	Y	Y	Y	IFSC Code															

A/c Type - S/B NRE Current NRO FCNR*

*Kindly provide photocopy of the payment Instrument or Foreign Inward Remittance Certificate (FIRC) evidencing source of funds

Cheque/D.D. to be crossed "Account Payee" only and should be drawn payable to :-"SHRIRAM EQUITY AND DEBT OPPORTUNITIES FUND A/C xxxxxx" (Investor PAN) or "SHRIRAM EQUITY AND DEBT OPPORTUNITIES FUND A/C XXXXXX" (Name of the Firstholder)

9. NOMINATION DETAILS [Minor / HUF / POA Holder / Non Individuals Cannot Nominate]

I/We _____ do hereby nominate the undermentioned Nominee(s) to receive the units to my/our credit in the folio no. in the event of my/our death. I/We also understand that all payments made to such Nominee(s) and Signature of the Nominee(s) acknowledging receipt thereof, shall be a valid discharge by the AMC / Mutual Fund / Trustees.

No.	Nominee(s) Name	Relationship	% of Share*	Date of Birth (in case of Minor)	Nominee(s) Signature
1				D D M M Y Y Y Y	
2				D D M M Y Y Y Y	
3				D D M M Y Y Y Y	
No.	Name of the Guardian (In case of Nominee is Minor)				Guardian(s) Signature
1					
2					
3					

* If the percentage of share is not mentioned then the claim will be settled equally amongst all the indicated nominee(s)

<input type="checkbox"/> I/We do not wish to nominate anybody on my/our behalf.	Signature of the declarant
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10. DECLARATION

I / We have read and understood the contents of the SID and Key Information Memorandum of the Scheme. I/We hereby apply to the Shriram Mutual Fund for allotment of units of the Scheme, as indicated above and agree to abide by the terms, conditions, rules and regulations of the Scheme. I / We hereby confirm and certify that the source of these funds is not directly / indirectly a result of "proceeds of crime" as defined in "The Prevention of Money Laundering Act, 2002" and I/we undertake to provide all necessary proof/ documentation, if any, required to substantiate the facts of this undertaking. I/We have not received nor been induced by any rebate or gifts, directly or indirectly in making this investment. I / We authorize the Fund to disclose details of my/our account and all my/our transactions to the intermediary whose stamp appears on the application form. I/We also authorize the Fund to disclose details as necessary, to the Fund's and investor's bankers for the purpose of effecting payments to me/ us. Applicable to NRIs only : I/We confirm that I am/we are Non-Resident of Indian Nationality/Origin and I/we hereby confirm that the funds for subscription have been remitted from abroad through approved banking channels or from funds in my/our Non-Resident External / Ordinary Account/FCNR/NRSR Account.
Investment in the scheme is made by me / us on : Repatriation basis Non Repatriation basis.
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.

Signature
First / Sole Applicant / Guardian
Second Applicant
Third Applicant

Scheme Name : SHRIRAM EQUITY AND DEBT OPPORTUNITIES FUND
Plan : <input type="checkbox"/> Regular <input type="checkbox"/> Direct (Please ✓ any one). Option : _____ Sub Option : _____
Cheque / DD No. _____ Date : _____ Amount Rs. : _____
Bank and Branch : _____

REGISTRAR & TRANSFER AGENTS
Computer Age Management Services Pvt. Ltd., (SEBI Registration No. : INR00002813)
New No. 10, Old No. 178, M.G.R. Salai, Nungambakkam, Chennai - 600 034
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