

3. Investment Details (Cheque / DD should be drawn in favour of the Scheme. Investors applying under direct plan must mention "Direct" in the box provided below.)

Invesco India Scheme Name	Plan	Option
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Payment Details (For Cash, refer instruction no. 7)

Investment Amt. (Rs.)	DD Charges (Rs.)	Net Amt. (Rs.)	Cheque/DD No./UMRN
Net of DD Charges			
Bank Name		A/c. No.	
Mode of Payment <input checked="" type="checkbox"/> Cheque <input type="checkbox"/> DD <input type="checkbox"/> Funds Transfer <input type="checkbox"/> Cash <input type="checkbox"/> NACH		Account Type <input checked="" type="checkbox"/> Current <input type="checkbox"/> Savings <input type="checkbox"/> NRE <input type="checkbox"/> NRO <input type="checkbox"/> FCNR <input type="checkbox"/> SNRR <input type="checkbox"/> Others	
Applicable in case of Third Party Payment: Payment on behalf of <input checked="" type="checkbox"/> Minor <input type="checkbox"/> Client <input type="checkbox"/> Employee <input type="checkbox"/> Distributor (Refer instruction no. 6).		PAN/KRN	
Name of the person making payment		Enclosed <input checked="" type="checkbox"/> KYC Proof	

4. For SIP / Micro SIP for Post Dated Cheques

<input type="checkbox"/> SIP <input type="checkbox"/> Micro SIP	Refer instruction no. 6
SIP through Post Dated Cheques (Use CTS (Cheque Truncation System) Cheques only)	
Period From <input style="width:100px;" type="text" value="MM YYYY"/> To <input style="width:100px;" type="text" value="MM YYYY"/>	Applicable in case of Third Party Payment: <input type="checkbox"/> Minor <input type="checkbox"/> Client <input type="checkbox"/> Employee <input type="checkbox"/> Distributor
Cheque Nos. From <input style="width:100px;" type="text"/> To <input style="width:100px;" type="text"/>	Payment on behalf of <input checked="" type="checkbox"/>
Drawn on Bank <input style="width:100px;" type="text"/>	Name of the person making payment <input style="width:100px;" type="text"/>
Frequency <input checked="" type="checkbox"/> Monthly (Default) or <input type="checkbox"/> Quarterly	Enclosed <input checked="" type="checkbox"/> KYC Proof
SIP Date <input checked="" type="checkbox"/> 3 rd <input type="checkbox"/> 10 th <input type="checkbox"/> 15 th (Default) <input type="checkbox"/> 20 th <input type="checkbox"/> 25 th Or	PAN / KRN <input style="width:100px;" type="text"/>
Mention Date of your choice <input style="width:100px;" type="text"/>	

5. Demat Account Details

DP ID # <input style="width:100px;" type="text"/>	Beneficiary Account No. <input style="width:100px;" type="text"/>	DP Name <input style="width:100px;" type="text"/>
Optional, Refer instruction no. 11 <input checked="" type="checkbox"/> NSDL <input type="checkbox"/> CDSL		
(# Not applicable in case of CDSL.)		
The details of the Bank Account linked with the Demat A/c as mentioned below should be provided under section 5.		

6. Bank Account Details (Mandatory As Per SEBI Guidelines)

Bank A/c. No. <input style="width:100px;" type="text"/>	A/c. Type <input checked="" type="checkbox"/> Current <input type="checkbox"/> Savings <input type="checkbox"/> NRE <input type="checkbox"/> NRO <input type="checkbox"/> FCNR <input type="checkbox"/> SNRR <input type="checkbox"/> Others _____
Bank Name <input style="width:100px;" type="text"/>	Branch <input style="width:100px;" type="text"/>
City <input style="width:100px;" type="text"/>	Address <input style="width:100px;" type="text"/>
MICR Code <input style="width:100px;" type="text"/> (9 digit No. next to your Cheque No.)	NEFT/RTGS/IFSC Code <input style="width:100px;" type="text"/> PIN <input style="width:100px;" type="text"/>
(11 digit character code appearing on cheque leaf)	

Please provide a cancelled cheque leaf of the same bank account as mentioned above. We will credit the redemption/dividend proceeds directly into investors' account through electronic means if the details provided by the investors are sufficient for the same. Mentioning your IFSC will help us transfer the amount to your bank account faster. To receive cheque payout, If you have provided multiple bank registration form . Unit holders who have opted to hold Units in dematerialised form must provide Bank Account details linked with the Demat account, as mentioned under section 4. In case of discrepancy, bank details as per depository records will be final.

7. Nomination Details (Mandatory for investors who opt to hold units in non-demat form.)

Name	Date of Birth (for minor)	% Share	Relationship	Nominee PAN	
Nominee 1 <input style="width:100px;" type="text"/>	<input style="width:100px;" type="text" value="DD MM YYYY"/>	<input style="width:100px;" type="text"/>	<input style="width:100px;" type="text"/>	<input style="width:100px;" type="text"/>	
Nominee 2 <input style="width:100px;" type="text"/>	<input style="width:100px;" type="text" value="DD MM YYYY"/>	<input style="width:100px;" type="text"/>	<input style="width:100px;" type="text"/>	<input style="width:100px;" type="text"/>	
Nominee 3 <input style="width:100px;" type="text"/>	<input style="width:100px;" type="text" value="DD MM YYYY"/>	<input style="width:100px;" type="text"/>	<input style="width:100px;" type="text"/>	<input style="width:100px;" type="text"/>	
Name of Guardian (if Nominee is Minor)		Guardian's Relation (with the minor)		PAN of Guardian	
<input style="width:100px;" type="text"/>		<input style="width:100px;" type="text"/>		<input style="width:100px;" type="text"/>	
Address <input style="width:100px;" type="text"/>					
I do not intend to nominate <input checked="" type="checkbox"/> the box, in case you do not wish to nominate <input type="checkbox"/>					

8. Declaration & Signature(s)

<p>The Trustees, Invesco Mutual Fund Having read and understood the contents of the Statement of Additional Information / Scheme Information Document(s) of the scheme, 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. I/We do not have any existing Micro Investments which together with the current Micro Investment application will result in aggregate investments exceeding Rs. 50,000/- in a year (applicable to Micro Investment investors only). The Distributor 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 authorise Invesco Mutual Fund, its Investment Manager and its Agents to disclose details of my / our investment to my / our bank(s) / Invesco Mutual Fund's Bank(s) and / or Distributor / Broker/ Investment Advisor and to verify my/ our bank details provided by me / us. I / We hereby declare that the particulars given above are correct. If the transaction is delayed or not effected at all for reasons of incomplete or incorrect information, I/We would not hold Invesco Asset Management (India) Pvt. Ltd. (Investment Manager to Invesco Mutual Fund), their appointed service providers</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> If NRI <input checked="" type="checkbox"/> Repatriation basis <input type="checkbox"/> Non-Repatriation basis</p> <p>Date <input style="width:100px;" type="text" value="DD MM YYYY"/> Place <input style="width:100px;" type="text"/></p>	<p>or representatives responsible. I / We will also inform Invesco Asset Management (India) Pvt. Ltd., about any changes in my/ our bank account. I / We hereby declare that the amount being invested by me / us in the Scheme of Invesco Mutual Fund is derived through legitimate sources and is not held or designed for the purpose of contravention of any Act, Rules, Regulations or any statute or legislation or any other applicable laws or any Notifications, Directions issued by any governmental or statutory authority from time to time.</p> <p>I / We confirm that I / We are not United States person(s) under the laws of United States or residents(s) of Canada as defined under the applicable laws of Canada. Applicable to KRN holders : I, the first / sole holder hereby declare that I do not hold a Permanent Account Number and hold only a single 'PAN exempt KRN' issued by KRA and that my existing investment in schemes of Invesco Mutual Fund together with current application will not result in aggregate investments exceeding Rs. 50,000/- in a rolling 12 months period or in a financial year i.e. April to March. Applicable to NRIs only : I / We confirm that I am / we are Non-Residents of Indian Nationality /Origin and that the funds are remitted from abroad through approved banking channels or from my /our NRE / NRO / FCNR/ SNRR Account. I / We confirm that the details provided by me / us are true and correct.</p>
Sole / First Applicant / Guardian / POA	<input style="width:100px;" type="text"/>
Second Applicant / POA	<input style="width:100px;" type="text"/>
Third Applicant / POA	<input style="width:100px;" type="text"/>

GET IN TOUCH

Invesco Mutual Fund
 2101-A, A Wing, 21st Floor, Marathon Futurex, N. M. Joshi Marg,
 Lower Parel, Mumbai - 400 013.
 T +91 22 67310000 F +91 22 23019422

call : 1800-209-0007 > sms 'Invest' to 56677 > Invest Online www.invescomutualfund.com