COMMON APPLICATION FORM

PLEASE READ THE INSTRUCTIONS BEFORE FILLING UP THE FORM. All sections to be completed in ENGLISH in BLACK / BLUE COLOURED INK and In BLOCK LETTERS (all points marked* are mandatory). For SIP investment use the separate SIP Form.

MUTUAL FUND

M FINANCIAL

To Know Your KYC Status Scan Here

To check your Name as per PAN and know your latest KYC Status; send an SMS to 92129 93399, in the below mentioned format:

KYC (Space) JMF (Space) (PAN Number in Capital Letters) (Space) Date of Birth in DD/MM/YYYY (Space) Name as per PAN

Sample SMS to be sent to 92129 93399 - KYC JMF ABCDE1234F 01/01/1980 First Name (Space) Last Name

	DISTRIBUTOR INFO	FOR OFFICE USE ONLY									
Name & ARN of Distributor / RIA Code*	Employee Unique Identification No. (EUIN)^	Sub-Broker ARN Code No.	Internal Sub-Broker Code (as allotted by Distributor)	In-House number as per K-BOLT	Date, Time and Number as per Time Stamping Machine						
ARN-181211	E528682										

^Mandatory: Furnishing of EUIN is mandatory for all transactions (Purchase/Switch/SIP/STP) or following declaration should be signed by the investor (Please 🗸 the box). Declaration: "I/We hereby confirm that the EUIN 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.
*RIA/Declaration: I/We hereby give you my/our consent to share/provide the transactions data feed/portfolio holdings/NAV etc. in respect of my/our investments under Direct Plan of all schemes managed by you to the above mentioned SEBI registered investment adviser/RIA.

SIGNATURE (s) SOLE / FIRST APPLICANT	SECOND APPLICANT	THIRD APPLICANT													
"Upfront Fee or commission shall be paid directly by the investor to the AMFI registered Dis	tributor based on the investor's assessment of various factors in	cluding the service rendered by the distributor".													
TRANSACTION CHARGES (PLEASE) (Refer Instruction No.XIX)															
I am a First Time Investor in Mutual Funds	I am an Existing Investor in Mutual Funds														
In case the subscription amount is ₹10,000/- or more and your Distributor has opted to receive Transaction Charges, ₹150 (for first time mutual fund investor) or ₹100/- other than first time mutual fund investor) will be deducted from the subscription amount and paid to the distributor. Units will be issued against the balance amount invested															
INVESTMENT TYPE (Please tick any one)	MODE OF HOLDING (Please tick \checkmark)														
LUMP SUM SPECIAL SIP## LUMP SUM WITH SIP/STP/SWP	SINGLE JOINT* EITHER OR SURVIVOR (* Default, in case of ambiguity when applicant are more than one														
#Special SIP - New SIP registration without initial investment.															
EXISTING UNIT HOLDER'S INFORMATION (Please fill in your															
Folio No. Require Hard Copy of Annual Report Yes No															
1. APPLICANT INFORMATION (Mandatory) TO BE FILLED IN BLOCK LETTERS AND AS PER PAN RECORDS.															
NAME OF SOLE /1ST APPLICANT Mr. Ms. M/s.															
PAN/PEKRN Submit verified copy of CKY (Mandatory)	C No.	DOB/DOI ^s D D M M Y Y Y Y													
Mobile No. [#] Email ID. [#]															
Mobile no. specified above belongs to (Please tick (\checkmark) any one option Self	Spouse Dependent Parents Dependent Ch	ildren Dependent Siblings Guardian POA													
Email id specified above belongs to (Please tick (🗸) any one option	Spouse Dependent Parents Dependent Ch														
LEI No. (Legal Entity Identifier) of Non-Individual Investor (Mandatory) :		Valid Upto //202													
Note : In case the first applicant is Non Individual please attach FATCA, CRS & UBO Self Certification Form. LEI No. is Mandatory for transaction amount 50 Crs and above for Non Individual. *Proof of Date of Birth of Minor Birth Cetificate Passport Others (Please specifi															
GUARDIAN DETAILS (In case First / Sole Applicant is minor) / CONT															
Mr. Ms. M/s.															
	Relationship with Minor/Designation														
PAN/PEKRN Date of Birth	D M M Y Y Y Y CKYC No.														
ADDRESS															
	CITY	(As per KYC Records)													
STATE	COUNTRY														
RESI. S T D OFF. S T	D FAX														
SECOND APPLICANT Mr. Ms. Image: Control of the second															
PAN/PEKRN CKYC No.		Date of Birth D D M M Y Y Y Y													
Mobile No. [#] Email ID. [#]															
Mobile no. specified above belongs to (Please tick (✓) any one option Self	Spouse Dependent Parents Dependent Ch	ildren Dependent Siblings Guardian POA													
Email id specified above belongs to (Please tick (\checkmark) any one option Self [Spouse Dependent Parents Dependent Children Dependent Siblings Guard														
ACKNOWLEDGEMENT SLIP		JM FINANCIAL													

Collection Center's Stamp & Receipt Date and Time

Drawn

vide Cheque No _

Scheme

on Bank and Branch

Please note: All purchases are subject to realization of cheques and as per applicable load structure (please refer Scheme Information Document)

_/___

_Dated ___

Plan Regular Direct Option

Amount (₹) _

2

HIRD APPLICANT	Mr. Ms.																	
AN/PEKRN			Date o	f Birth D	D	M M Y Y	Y Y	CKYC N	o.									
Mobile No.#			Em	ail ID.*														٦
Mobile no. specified a	bove belongs to (F	Please tick (✓) an	ny one optio	n 🗌 Selt	f 🗌 Sp	ouse 🗌 Depen	dent Par	ents 🗌	Depend	lent Chil	dren 🗌	Depen	dent Sib	lings	G	uardiar	ח 🗌 PC	OA
Email id specified abo	5,			Self	·		dent Par				dren 🗌	· ·				uardiar	n 🗌 PC	OA
SMS and/ Email ID v	vill be used as the	default mode o	of communi	ication if tl	he mob	ile no. and/or Em	ail ID is fu	ırnished	. + ln cas	se, not tio	ked, it w	ill be tre	eated to	have	"opteo	d out".		
STATUS			·						• •			7						
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PIO PSU		of Minor (RI) IPO* (Mandato				RI) Society	50	•		specify)	t /Chari	ties/inc	30°S		ual Fi	unas		
"Non-profit organizat						aritable purposes r	eferred to					ne-tax A	.ct, 1961 ((43 of 1	1961), t	hat is re	gistered	d as
a trust or a society und	ler the Societies Re	gistration Act, 186	60 (21 of 1860	0) or any sir	milar Sta	te legislation or a C	ompany r	egistered	under th	e section	8 of the C	ompani					5	
We are falling un in clause (15) of		5					0		•	•			Yes					
Registration Act,	Registration Act, 1860 (21 of 1860) or any similar State legislation or a Company registered under the section 8 of the Companies Act, 2013 (18 of 2013).																	
Act, 2013 (18 of 2																_		
, , , , , , , , , , , , , , , , , , , ,	yes, please quote Registration No. of Darpan portal of Niti Aayog ot, please register immediately and confirm with the above information. Failure to get above confirmation or registration with the portal as mandated, wherever applicable will force MF / AMC to register																	
your entity name in th	not, please register immediately and confirm with the above information. Failure to get above confirmation or registration with the portal as mandated, wherever applicable will force MF / AMC to register our entity name in the above portal and may report to the relevant authorities as applicable. We am/are aware that we may be liable for it for any fines or consequences as required under the respective to the respective strategies and authorize on the relevant authorities as applicable. We am/are aware that we may be liable for it for any fines or consequences as required under the respective to the results of the respective strategies and authorize on a palicable.																	
	utory requirements and authorize you to deduct such fines/charges under intimation to me/us or collect such fines/charges in any other manner as might be applicable. /ERSEAS APPLICANT DETAILS [APPLICANTS FROM US and CANADA WILL NOT BE ACCEPTED (Refer Instruction No 7.)]																	
	RESS (Mandatory for NRI/FII applicant)																	
Duntry Zip Code TIN No. (Mandatory)																		
2. KYC DETAIL		- Refer Insti	ruction N	10. XIII T	or det	alls)												
	Business	Service	Profes	sional	Ag	riculturist	Housev	/ife	Stud	ent [Defer	ice	Govt	. offici	ial	For	rex Deal	ler
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SROSS ANNUAL II	1								c									_
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	Net Worth (Mandatory for Non-Individuals) ₹ as on D D M M Y																	
Second Applicant		Below 1 Lac									· · ·		· · ·					_
Third Applicant	For Individual	Below 1 Lac	1 - 5 Lacs				>25 L							ecity)				_
OLITICALLY EXP	1	ally Exposed Per				Politically Expos			_	ρ της ap t Applica	•	on form	15)					
Second Applicant		<i>,</i> ,				Politically Expos				t Applica								_
Third Applicant		ally Exposed Pe				Politically Expos				t Applica								
or Non-Individua	ls (Companies,	Trust, Partne	ership etc.)	(Please t	ick √)													
Foreign Exchan	ge / Money Chang	ger Service] Gamin / Ga	ambling /	Lottery	/ Casino Services	M	oney Le	nding / F	Pawning	No	t Applic	able					
3. FATCA/CRS	DETAILS MAN	DATORY FO		IDUALS	(Non In	dividual Investors	should m	andator	v fill sepa	arate FAT	CA/CRS d	etails fo	rm)	(Refe	er Inst	ruction	No. XV	/III)
	rst Applicant / G				(2nd Applicant					_		olicant			POA		
Place & Country of	Birth :	/	PI	ace & Coi	untry o	of Birth :		/		Place &	Countr			/				
Country	Tax Payer	Identification [TIN or other, pleas	n Type	Count		Tax Payer		ification ther, pleas			untry		Гах Рау	/er			ion Typ ease speci	
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•			ruction N	No. 5)*??	lnvest	ment in more tha	in one Sc	heme ch	ieque sh	ould be	issued in	favor o	f JM FIN	ANCIA	L MU	TUAL F	UND -	
4. INVESTMEN																		
 INVESTMEN COLLECTION ACTION 	T DETAILS (P COUNT (For Lum Scheme Name					Plan			Option		9	Sub Opt	tion			Amou	nt	
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3. 4. INVESTMEN COLLECTION AC 5r. No. 1. JM 2. JM	COUNT (For Lum					Plan			Option			Sub Opt	tion			Amou	nt	
Sr. No. 1. JM	COUNT (For Lum					Plan			Option			Sub Opt Tota				Amou	nt	

5. BANK	5. BANK ACCOUNT DETAILS (Refer Instruction No. IV														. IV)																									
Account No																			Aco	coun	t Ty	/pe [l	Plea	ase 🗸	/]		SB	C	urrei	nt	NF	0	NR	E	FCNR	(I	Direct	t Rei	mitta	nces
Bank Name										1																							Τ							
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	t is mandatory to furnish bank particulars failing which application shall be rejected. Please submit documentary proof of the bank mandate depicting the name of the 1st / sole applicant).																																							
6. INVES	6. INVESTMENT AND PAYMENT DETAILS (Pls refer Instructions/ KIM) For each application and for each plan/option separate cheque / DD to be submitted.																																							
Cheque					1				ount (1		arges							t (Rs.)						lccour									Bank 8					
Please ment If No, my rela Documents	ation	ship w	/ith th	ne ba	nk aco	our	nt ho	lder	is] Spo	use [C	hild [Pa	arent	t 🗌 I	Rela	tive		Other	s. Aj	pplic	atic	on fo	٥rm	vitho	out t] No			
IN CASE	IN CASE OF PAYMENT BY 1ST APPLICANT (Please 🗸)																																							
 I / We hereby declare that the above mentioned Demand Draft^^ has been issued: from/by debit to my personal/my joint Bank Account against cash (in case of demand draft) upto Rs. 50,000/ ^^In case of Demand Draft, Banker's certificate about the source of funds is attached. Please attach foreign inward remittance Certificate (FIRC) / account debit Certificate in case of debit to NRE / NRO account or direct remittance from abroad. 																																								
7. PERMITTED THIRD PARTY'S (WHO IS ISSUING THE CHEQUE) DETAILS (Pls refer para on Third Party Payment)																																								
The relationship of 1st Applicant with the issuer of Third party Payment instrument is as (Please (🗸))																																								
Parent/	Grar	id Pai	rent/	'Rela	itive	n c	ase	of 1	st A	ppli	cant	beir	ng a	min	or		Emp	oloy	er (i	n ca	se c	ofde	edu	ictic	on f	rom	sala	ary)	L		usto	dia	۱on	beh	nalf o	f FII/	/Clier	nt.		
Full Name of	f Thi	rd Pai	rty																																					
PAN No. of 1	Third	Party	′												(Ple	ease (√))	күс	Cor	nplia	ant		Yes	6] No) (Ple	ase	atta	ich k	YC a	ackr	owle	edge	mer	ıt & R	efer	instru	ictic	ons)	
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DECLARATI the section on " I/We have not i sources and is in from time to tiu sources and the Fund, recover/or agree that the F to him for the d is the Investme Consent for sh Mutual Fund/I/M RIA/ARN Code i ##Applicable t	aring M Fina is mer	Inform ncial Tr tioned only:	ation ustee above	:- I /W Co. P\ 2. * conf	e herel rt. Ltd. I firm tha	y co /We it I ai	onsen also o m / w	it to t conse re* ar	the dis ent to e Non	closu the sh -Resid	re/sha aring lent of	ring o of the f India	of my/o transa	our pe action ionalit	ersona feed	al infoi of my, rigin a	mati /our nd I /	ion to Invest 'We* I	the J ment	ludicia t in the	al /St e abo	atuto ove So	ory/ F chen	Regul ne of	atory JM F	/ Auth inanci	ioriti ial M	es for utual	the c Fund	ompl with	iance the F	of legiste	gal ob ered Ir	oligatio nvestn	on of J ment A	M Fina dvisor	nancial / r (RIA)/I	AMC/ Distri	/JM Fir ibutor	nancial whose
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Date:																															(Pla	ice:							

Note: In case the First Applicant is a Non Individual, please attach FATCA, CRS & UBO Self Certification Form ^** The application is liable for rejection if the name does not match with PAN copy. It is mandatory for investors to be KYC compliant prior to investing in JM Financial Mutual Fund. & US and Canada Investors are not permitted to invest in our Schemes. ^ In case, not ticked, it will be considered as Not Applicable.

Please (\checkmark) \square Repatriation basis \square Non-Repatriation basis.