

For details on transaction charges payable to distributors, please refer to KIM.

I/We hereby confirm that the EUIN box has been intentionally left blank by me/us as this transaction is executed without any int eraction 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/rela tionship manager/sales person of the distributor/sub broker.

Sign Here - Sole/First Applicant/Guardian/POA					
Sign Here - Second Applicant					
Sign Here - Third Applicant					

Systematic Withdrawal Plan (SWP)

Please refer instructions before filling the form

I/We hereby apply to the Trustees of Invesco Mutual Fund for Systematic Withdrawal Plan (SWP) enrollment under the following scheme and I / We agree to abide by the terms and conditions of the Plan

Key Partner/	'Agent Informa	tion					
Mutual Fund	d Distributor ARN	Sub-Broker ARN Code			Internal Sub-Broker/Employee Code		
ARN-	181211	ARN -					
Employee	e Unique Identification	No. (EUIN)			Investment Advisor (RIA) Code / ger's Registration Number (PMRN)		
Unfront commissi		ctly hy the invest	or to the AMFI	register	red distributors based on the investors'		
	ious factors, including				The involution		
Folio Number							
Application Numb	er						
1. Applicant's	Personal Details						
First/Sole Applicant Name	Mr. / Ms. / M/s.	Mr. / Ms. / M/s.					
PAN/PEKRN							
KIN							
	: Withdrawal Plan (olying under the direct		n "Direct" in the	Plan box	provided below)		
Scheme	Invesco India						
	Plan: Regular	Plan: Regular Direct Option					
	☐ Fixed Am	ount 🗌 C	apital Appreciati	on Amou	nt		
Frequency	☐ Weekly (1	☐ Weekly (1st business day of each week) ☐ Monthly (Default) ☐ Quarterly					
SWP Date (✔ Any O	ne) 3 rd	□ 10 th □ 15	i th (Default)] 20 th	25 th		
Period of Enrollmen	t from (1st Installment)	M M Y Y	У У То	(Last Inst	tallment) M M Y Y Y		
Withdrawal Amount (Per Installment)	Rs. in Words						
(i ei ilistallillelit)		(Not applicable for Appreciation Option)					
	Rs. in Figures	Rs. in Figures					
No. of Installments			Total Withdrawal	Rs. in Fi	igures		
	_		he Application	Form and	d in the same order. In case the mode of		
Sole/Firs	t Applicant/Guardian	Sec	ond Applicant		Third Applicant		
Date D D	M M Y Y Y	Y	Pl:	ace			