

RL FINANCE-ARN-42260
EUIN –E025630

Request For Cancellation Of SIP / STP / SWP {Apply [✓] whichever applicable}

AMC/Mutual Fund: _____

Name of Investor: _____

<p>Cancellation of SIP { }</p> <p>Folio No: _____ Plan: Regular / Direct</p> <p>Scheme Name: _____</p> <p>Option: Growth / Dividend</p> <p>SIP Start Date: / / End Date: / /</p> <p>Cancellation Effective Date: ____/____/____ Amount: _____</p> <p>Investors Bank Name: _____</p> <p>Bank AC.No: _____</p>	<p>Cancellation of STP { }</p> <p>Folio No: _____ Plan: Regular / Direct</p> <p>From Transferor Scheme: _____</p> <p>_____ Option: Growth / Dividend</p> <p>To Transferee Scheme: _____</p> <p>_____ Option: Growth / Dividend</p> <p>Start Date: _____</p> <p>End Date: _____</p> <p>Frequency: _____</p> <p>Amount: _____</p>
<p>Cancellation of SWP { }</p> <p>Folio No: _____ Plan: Regular / Direct</p> <p>Scheme Name: _____</p> <p>Option: Growth / Dividend Amount:Rs. _____</p> <p>Frequency: { } Monthly / { } Quarterly</p>	

SIGNATURE (S)	Date:	
SOLE / FIRST APPLICANT	SECOND APPLICANT	THIRD APPLICANT

ACKNOWLEDGEMENT SLIP (To be filled by the investor)	
<p>We acknowledge the receipt of the request for Cancellation of SIP / STP / SWP from Mr. /Ms. / M/s.</p> <p>_____ in the Folio No . _____</p> <p>Scheme name _____ Plan _____ in _____</p> <p>_____ Mutual Fund. Amount _____ with effect From _____</p>	<p>Service Centre Signature and Stamp</p>