

## REPURCHASE / REDEMPTION REQUEST FORM [RRF]

Participant Name	P SURYAKANT SHARE AND STOCK BROKERS PVT. LTD.								
Depository Participant ID	1	2	0	7	4	8	0	0	

RRN		Date	D	D	M	M	Y	Y	Y	Y
RFN No.		Date	D	D	M	M	Y	Y	Y	Y

I/We offer the below mentioned **Mutual Fund (MF)** units for repurchase / redemption and declare that my/our account be debited **"All"** or **the number of MF Units** to the extent of my/ our repurchase / redemption request and proceeds be paid to me/us cheque/ bank draft. I/We hereby declare that the below mentioned person(s) are the beneficial owners of the MF Units mentioned.

Demat Account Number	1	2	0	7	4	8	0	0									
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Name of First / Sole Holder									
Name of Second Holder									
Name of Third Holder									

No. of MF units to be Repurchased/Redeemed (in figures) or <b>"ALL"</b>	"Amount"(Rs.)
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in words (integers and fractions)									

Name of the security / scheme									
Name of the issuing Company / AMC									
Face Value									
ISIN									

**If all holdings in the Demat account are to be redeemed / repurchased, then "ALL" should be mentioned in the Quantity column.**  
**Specimen Signature(s)**

	Name	Signature
First / Sole Holder	_____	_____
Second Holder	_____	_____
Third Holder	_____	_____

**Participant Authorization**

Received the above mentioned MF Units for repurchase/ redemption from

Account No.									
ISIN									
Date	D	D	M	M	Y	Y	Y	Y	

Name of First / Sole Holder									
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The application form is verified with the details of the beneficial owner's account and certified that the application form is in order. The account has sufficient balance to accept the repurchase/ redemption request. It is also certified that the beneficial owner's signatures are verified and found to be in order.

RFN Set up Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Time: \_\_\_\_\_

Depository Participant's Signature \_\_\_\_\_ Seal \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

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**Acknowledgement** **DP.ID.12074800**  
**P SURYAKANT SHARE & STOCK BROKERS PVT.LTD.**  
D.P.OFFICE: A/ 305-308-403, Premium House, OPP. Gandhigram Railway St. Ellisbridge, Ahmedabad - 380 006.  
 TEL.:079-30223350,26575972 MO.:9979883933, FAX : 079-3000 0089 E- mail ID.: psdp.help@psjsecurities.com  
**REGD. OFFICE** :Bldg .No.5, 5<sup>th</sup> Floor , Rajabhadur Compound, B.S Marg , Mumbai - 400 001, TEL.:022- 4220

We hereby acknowledge the receipt of repurchase/ redemption request for \_\_\_\_\_ no. of securities of \_\_\_\_\_  
 (security details) from \_\_\_\_\_ (Name) holding a/c no. \_\_\_\_\_

\_\_\_\_\_  
 Depository Participant's Signature Seal Date