EMAIL ID, MOBILE NO & PAN UPDATION FORM

LIC MUTUAL FUND

TO BE FILLED IN BLOCK CAPITAL LETTERS IN BLACK / BLUE ONLY

(Refer Instruction No. 6)

Name of the First Unitholder _____

Folio No. | | | | | | | | | | | **Date** D D M M Y Y Y Y

Email Id _____

(Mandatory - Please tick ✓ the relevant box) ☐ SE ☐ SP ☐ DC ☐ DS ☐ DP ☐ GD

Mobile No. | | | | | | | | | | | **(Mandatory - Please tick ✓ the relevant box)** ☐ SE ☐ SP ☐ DC ☐ DS ☐ DP ☐ GD

Unit Holder need to specify by giving the declaration of the family code of whose email id and/ mobile no are mentioned in the application. Please refer the below codes.

Family code	SE	SP	DC	DS	DP	GD
Family Description	Self	Spouse	Dependent Children	Dependent Siblings	Dependent Parents	Guardian

Tel No.(Resi) (STD Code) | | | | | | | | | | **Tel No. (Off)** (STD Code) | | | | | | | | | |

	Name of the Holders	**PAN / PEKRN** (Please attach self-attested photocopy of: PAN card and KYC letter. Please write the PAN in CAPITAL letters)
First holder		
Guardian (Applicable for minor)		
Second Holder		
Third Holder		

Declaration & Signature (s): I / We hereby declare that the above information submitted is true and correct and if the above is found to be false or misleading then I / we will be held liable. We hereby attach a self-attested photo copy of the PAN/PEKRN for all the applicable holder (s).
I declare that Email address and Mobile number provided in this form belongs to Self (or) Family Member, and approve for usage of these contact details for any communication with LIC MF.
Please note all kinds of investor communication will be sent through email only instead of physical, for investors who provide their email address.

⊗	⊗	⊗
SIGN HERE	SIGN HERE	SIGN HERE
Signature of First Holder / Guardian	**Signature of Second Holder**	**Signature of Third Holder**

ACKNOWLEDGMENT SLIP

LIC MUTUAL FUND

Folio No _____

Received From Mr. / Ms. _____

For ☐ **Updation of Email ID** _____

☐ **Mobile No.** | | | | | | | | | | |

☐ **PAN** | | | | | | | | | | |

For office use Signature of Receiving authority

Stamp & Signature

Date of receipt : D D M M Y Y Y Y

Time of receipt : _____

Corporate Office:
Industrial Assurance Building, 4th Floor, Opp. Churchgate Station, Mumbai - 400020.
Tel.: 022-66016000 | Fax: 022-66016191 | Email ID: service_licmf@kfintech.com
Website: www.licmf.com | Toll Free: 1800-258-5678

Register & Transfer Agents:
KFin Technologies Private Limited, Karvy Selenium Tower B, Plot Nos. 31 & 32 | Financial District Nanakramguda |Serilingampally Mandal | Hyderabad - 500032 .
Tel.: 040-44677131-40 | Fax: 040-22388705 | Email ID: service_licmf@kfintech.com
Website: www.kfintech.com

Mutual Fund Investments Are Subject To Market Risks, Read All Scheme Related Documents Carefully.