Invesco Mutual Fund

Systematic Transfer Plan (STP)/ Systematic Withdrawal Plan (SWP) Form

Please read instructions overleaf before filling the form

Form No : S

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

Key Partner / Agent Information

Distributor / Broker ARN	Sub-Broker ARN Code	Internal Sub-Broker/Employee Code	Employee Unique Identification No. (EUIN) (Of Individual ARN holder or Of employee / Sales Person of the Distributor)	Registered Investment Advisor Code
ARN-169080	ARN -		E334451	

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 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. (Refer Instructions.

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

Upfront commission shall be paid directly by the investor to the AMFI registered distributors based on the investors' assessment of various factors, including the service rendered by the distributor.

Folio Number : | | | | | | | | | | | Application Number :

1. Applicant's Personal Details

FIRST / SOLE APPLICANT PAN/KRN | | | | | | | | | | |

Name Mr. / Ms. / M/s.

SECOND APPLICANT PAN/KRN | | | | | | | | | | |

Name Mr. / Ms.

THIRD APPLICANT PAN/KRN | | | | | | | | | | |

Name Mr. / Ms.

2. Systematic Transfer Plan (STP) Mandate

(Investors applying under the direct plan must mention "Direct" in the box provided below)

From Scheme (from where you wish to transfer) Invesco India Scheme Name Plan Option

To Scheme (to where you wish to transfer) Invesco India Scheme Name Plan Option

Frequency (✓) ☐ Weekly ☐ Monthly *(Default)* ☐ Quarterly STP Date (✓) ☐ 3rd ☐ 10th ☐ 15th *(Default)* ☐ 20th ☐ 25th

(1st business day of each week)

Period of Enrollment From (1st Installment) M M Y Y Y Y To (Last Installment) M M Y Y Y Y

Transfer Amount (Per installment) ₹ In Words ₹ In Figures

No. of Installments Total Transfer (Rs.) (Amt. per installment x No. of installments)

3. Systematic Withdrawal Plan (SWP) Mandate

(Investors applying under the direct plan must mention "Direct" in the box provided below)

Scheme Invesco India Scheme Name Plan Option

Withdrawal Option (✓) ☐ Fixed Amount ☐ Capital Appreciation Amount

Frequency (✓) ☐ Weekly ☐ Monthly *(Default)* ☐ Quarterly SWP Date (✓) ☐ 3rd ☐ 10th ☐ 15th *(Default)* ☐ 20th ☐ 25th

(1st business day of each week)

Period of Enrollment From (1st Installment) M M Y Y Y Y To (Last Installment) M M Y Y Y Y

Withdrawal Amount to be (Per Installment) ₹ In Words ₹ In Figures

No. of Installments Total Withdrawal (Rs.)

4. Applicant's Signature

✍ Sole / First Applicant / Guardian / POA	✍ Second Applicant / POA	✍ Third Applicant / POA

Please note : Signature(s) should be as it appears on the Application Form and in the same order.
In case the mode of holding is joint, all Unit holders are required to sign

Date D D M M Y Y Y Y Place