

**REPURCHASE / REDEMPTION FORM (ANNEXURE HA)**  
**INDBANK MERCHANT BANKING SERVICES LIMITED**  
**DP ID IN300597 / IN303093/IN300853**  
**480, ANNA SALAI , I FLOOR, KHIVRAJ COMPLEX 1, NANDANAM,CHENNAI - 600 035**

Serial No \_\_\_\_\_

Date: \_\_\_\_\_

I/We offer the below mentioned securities for repurchase/ redemption and declare that my/our account be debited by the number of securities to the extent of my/our repurchase/ redemption request and make the payment as per the bank account details available in the depository system. I/We hereby declare that the below mentioned person(s) are the beneficial owners of the securities mentioned.

Client ID	
Sole/First Holder Name	
Second Holder Name	
Third Holder Name	
Type of Security	<i>MF Units/Others (please specify)</i>

ISIN	Mutual Fund / Issuer Name	All Units/No. of Units/Amount (Rs.) (Please mention as applicable)	RRN (Repurchase / Redemption Request Number) (To be filled in by Participant)
		Units Amount	
		Units Amount	
		Units Amount	

**Note :**

1. In case the space is found to be insufficient, a duly signed annexure containing the aforesaid details in the same format may be attached.
2. If 'Units' and 'Amount' both are mentioned, the request will be processed based on the 'Units'
3. 'All' and 'Amount based' options are available only for redemption requests.

<i>Holder(s)</i>	<i>Signature(s)</i>
Sole/First Holder	
Second Holder	
Third Holder	

### Acknowledgement

**Serial No**

We hereby acknowledge the receipt of following request(s) for repurchase / redemption from Mr/Ms/M/s \_\_\_\_\_ having DP ID \_\_\_\_\_ and Client ID \_\_\_\_\_

ISIN	Mutual Fund / Issuer Name	All Units/No. of Units/Amount (Rs.) (Please mention as applicable)
		Units
		Amount
		Units
		Amount
		Units
		Amount

**Name of the Official :**

**Participant's Stamp & Date**

**Signature :**