

FINOMATIC FINTECH SERVICES PVT. LTD.

"India House", 69, Ganesh Chandra Avenue, 3rd Floor, Kolkata-700013

	SIP CANCELLATION REQUEST																			
DATE:																				
Folio No. :	No.:																			
	PERSONAL DETAILS																			
1St Unit Holde	r Name																			
2nd Unit Holde																				
3rd Unit Holde	er Name																			
Mobile:								I	Ema	il ID										
SIP CANCELLATION REQUEST																				
Scheme:	Scheme:																			
Plan: Regular Option:															-					
SIP Auto Debit Date:																				
SIP Installment Amount Rs. Ceasure Date:											Y	Y								
Bank Name:																				
Bank Account No.																				
First Applicant						Second Applicant							Third Applicant							
					IN	STR	UC	ΓΙΟΝ	TO	BA	NK									
The Manager								Name	e of	the I	Bank									
Branch		City:																		
I/ we have canc	elled my/	our S	IP da	ated		D	D	of e	very	moı	nth/qı	uarter	in							
Scheme Name						for							with							
AMC name Mutual Fund.																				
Please discontinue debit to my above accou Name of Sole/1st Holder									the said SIP with immed of the 2nd Holder					Name of the 3nd Holder						
Traine of Soic/1st Holder						Name of the 2nd from							Traine of the Sha Holder							
Signature of S	ole/1st Ba	nk A/0	C hole	der		Signa	ature of 2nd Bank A/C holder						Si	gnatu	re of 3	3rd B	ank A	/C ho	lder	
SIP CANCELLATION Acknowledgement Slip																				
Client Name								PAN	_[Г				
Scheme								Optio		<u>,,</u> ,						-				
Branch Code			<u> </u>	Ι	Ι	<u> </u>		Recei	veu	υy						1 8				