



# Saraswat Co-operative Bank Ltd.

(Scheduled Bank)

110-111 & 129-131, Vyapar Bhavan, 1st floor, 49, P.D'mello Road, Carnac Bunder, Masjid, Mumbai 400009. Tel. : 22 23480039-41 Fax : 22 23480043

**DP ID : IN300829**  
**ANNEXURE – HA**

## REPURCHASE / REDEMPTION FORM

Serial No. No (pre-printed)

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 owner 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 :	

Notes :

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' option are available only for redemption request.

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

### Acknowledgement

Serial No (pre-printed)

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

Signature :

(Participant's Stamp & Signature)