

Tick	<input checked="" type="checkbox"/>	UMRN											D D M M Y Y Y Y							
Create:	<input type="checkbox"/>	Sponsor Bank Code	Office Use Only										Utility Code Office Use Only							
Modify:	<input type="checkbox"/>	I/We hereby authorize <b>GROWW MUTUAL FUND</b> to debit (tick ✓) <b>SB/ CA/ CC/ SB-NRE / SB-NRO/ Other</b>																		
Cancel:	<input type="checkbox"/>	From Bank A/C Number:																		

With \_\_\_\_\_ (Name of Destination Bank with Branch) IFSC Code: \_\_\_\_\_ MICR Code: \_\_\_\_\_

an amount of Rupees \_\_\_\_\_ (in words) ₹ \_\_\_\_\_

FREQUENCY:  Monthly  Quarterly  Half Yearly  Yearly  As & when presented DEBIT TYPE  Fixed Amount  Maximum Amount

Folio No. \_\_\_\_\_ Phone No. \_\_\_\_\_  
Schemes **ALL SCHEMES OF GROWW MUTUAL FUND** Email ID \_\_\_\_\_

I agree for the debit of mandate processing charges by the bank whom I am authorizing to debit my account as per latest schedule of charges of the bank

PERIOD From  To  Or  Until Cancelled

- This is confirm that the declaration has been carefully read, understood & made by me/us. I am authorised the user entity/ corporate to debit my account, based on the instruction as agreed and signed by me.
- I have understood that I am authorized to cancel/amend this mandate by appropriately communicating the cancellation/amendment request to the user entity / corporate or the bank where I have authorized the debit.

<p>1. _____ Signature of 1st Account Holder</p> <p>_____</p> <p>Name as in bank records</p>	<p>2. _____ Signature of 2nd Account Holder</p> <p>_____</p> <p>Name as in bank records</p>	<p>3. _____ Signature of 3rd Account Holder</p> <p>_____</p> <p>Name as in bank records</p>
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