



**COMMON REDEMPTION FORM**  
(Form for Redemption of Mutual Fund Units)

DATE & TIME STAMP

ARN-4464

E032737 VIKRAM S. BAGADTHEY

Sponsor: HB Portfolio Limited  
Investment Manager: Taurus Asset Management Company Limited

Ground Floor, AML Centre -1, 8 Mahal Industrial Estate, Mahakali Caves Road, Andheri (E), Mumbai - 400 093.

Name of Unitholder

I /we hold units in the scheme as follows. Please redeem as per instruction in the table below:

| Sr. | Folio No. | Name of Scheme | Plan | Option | Units | Amount |
|-----|-----------|----------------|------|--------|-------|--------|
|     |           |                |      |        |       |        |
|     |           |                |      |        |       |        |
|     |           |                |      |        |       |        |

**Remittance Advise**

|   |   |
|---|---|
| Preference of payment Please Tick (✓)   | For remittance to bank from the existing multi-bank registered list |
| 1. Please remit the redemption payment as per the existing preferred Bank account details. <input type="checkbox"/>       | Bank Name: _____<br>Branch: _____                                   |
| 2. Please remit the redemption payment as per the bank details mentioned in the adjacent column. <input type="checkbox"/> | A/c no. <input type="text"/>  |

**Important Note:** if incorrect / incomplete supporting documents are submitted for changing the bank account in the folio, the redemption will be processed into the bank account already registered for the aforesaid scheme in the folio. Taurus Mutual Fund or Taurus Asset Management Company Ltd. will not be liable for any loss arising to the unitholder(s) due to credit of redemption proceeds into any of the bank accounts registered with us for the aforesaid folio.

I/we agree to terms and conditions in accepting the request. I/we agree that should there be any discrepancy in the request, I/we authorize the AMC to reject the request.

|                  |                  |                  |
|------------------|------------------|------------------|
| Please Sign here | Please Sign here | Please Sign here |
|------------------|------------------|------------------|

First / Sole Applicant/ Guardian / POA Holder / Auth. Sign

Second Applicant / Auth. Sign

Third Applicant Sign



**COMMON REDEMPTION FORM ACKNOWLEDGEMENT**  
To be filled by the applicant

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