VIKRAM S. BAGADTHEY THIRD PARTY DECLARATION FORM

Certification of Custodian on behalf of an FII or client

Date: DD/MM/YYYY

(Required on Custodian Letterhead only and should be enclosed with each payment)

To, Principal Mutual Fund

I / We hereby confirm the following Application and Payment Details:

| , | | | | |
|---|---------------------------------------|-------------------------------|------------------------------------|----|
| Folio No. | | | Application No. | |
| Beneficiary Applicant / | | | | |
| Investor Name | | | | |
| Payment Mode | | Cheque | | |
| (Please ✓) | □ Bank Transfer | | | |
| | | RTGS | | |
| | | NEFT | | |
| | | Any other m | ode (please specify | y) |
| Instrument No. | | | | |
| Investment Amount | | | | |
| Details of Bank & Branch | | | | |
| Name, from which | | | | |
| payment is made | | | | |
| Payment from Account | | | | |
| No. | | | | |
| Name(s) of Account | | | | |
| Holder | | | | |
| We are registered with SE Custodian and this payment from the funds provided to use Signature of Authorised Signature of Authorised Signato | t is issue us by the natory (ie | ed by us in oue Applicant/Inv | r capacity as Custoc estor. | |
| Income Tax PAN No (Custod | ian): | | | |
| Registered Office / Correspo | ndence | Address of Cus | todian: | |
| City: | | State: | | |
| Postal code: | Cc | ountry: | | |
| Enclosed Herewith (Please of KYC Acknowledger KYC Acknowledger | nent Le | | | |