

ARN-4464

E032737 VIKRAM S. BAGADTHEY

## THIRD PARTY DECLARATION FORM

**Payment by Employer on behalf of Employee**    Date: DD/MM/YYYY  
(under Systematic Investments Plans or lumpsum / one time subscription through Payroll deductions)

*Required on the Employer company letter head only*

To,  
Principal Mutual Fund

We hereby declare that pursuant to instructions received from the Employee(s), as per the list enclosed herewith, who is/ are the beneficial owner/s of the Investment made in Scheme(s) of Principal Mutual Fund, through Pay roll deduction.

The Payment details for such investments are as per details provided here below :

cheque no: \_\_\_\_\_ dated \_\_\_\_\_ drawn on \_\_\_\_\_ (Name of the Bank / Branch).

Signature of the Authorised Signatory(ies) \_\_\_\_\_

Name of Authorised Signatory(ies) \_\_\_\_\_

Income Tax PAN no (Employer): \_\_\_\_\_

Stamp / Seal of the Employer :

Enclosed Herewith (Please ✓) :

- List of Employees with Code and signature authorizing such payroll deduction
- KYC Acknowledgement Letter of the Employer
- KYC Acknowledgement Letter of the Employee(s)