



# Pune e Stock Broking Ltd.

DP of Central Depository Services (I) Ltd  
1198 Shukrawar Peth, Subhash Nagar Lane-3, Near Hirabagh, Pune-411002  
Phone-020-41000640/641  
Email id: cdsi@pesb.co.in



## REPURCHASE / REDEMPTION REQUEST FORM [RRF]

Participant Name	Pune e Stock Broking Limited							
Depository Participant ID	1	2	0	5	8	1	0	0

RRN							Date	D	D	M	M	Y	Y	Y	Y
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RFN No.							Date	D	D	M	M	Y	Y	Y	Y
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I/We offer the below mentioned **Mutual Fund (MF)** units for repurchase / redemption and declare that my/our account be debited "**All**" or **the number of MF Units** to the extent of my/ our repurchase / redemption request and proceeds be paid to me/us cheque/ bank draft. I/We hereby declare that the below mentioned person(s) are the beneficial owners of the MF Units mentioned.

Demat Account Number	1	2	0	5	8	1	0	0							
Name of First / Sole Holder															
Name of Second Holder															
Name of Third Holder															
No. of MF units to be Repurchased/Redeemed (in figures) or " <b>ALL</b> "						<b>"Amount" (₹)</b>									
in words (integers and fractions)															
Name of the security / scheme															
Name of the issuing Company / AMC															
Face Value															
ISIN															

If all holdings in the Demat account are to be redeemed / repurchased, then "**ALL**" should be mentioned in the Quantity column.

Specimen Signature(s)	Name	Signature
First / Sole Holder	_____	_____
Second Holder	_____	_____
Third Holder	_____	_____

### Participant Authorization

Received the above mentioned MF Units for repurchase/ redemption from

Account No.															
ISIN															
Date	D	D	M	M	Y	Y	Y	Y							
Name of First / Sole Holder															

The application form is verified with the details of the beneficial owner's account and certified that the application form is in order. The account has sufficient balance to accept the repurchase/ redemption request. It is also certified that the beneficial owner's signatures are verified and found to be in order.

RFN Set up Date: \_\_\_\_\_ Time: \_\_\_\_\_

**Depository Participant's Signature** \_\_\_\_\_ **Seal** \_\_\_\_\_ **Date** \_\_\_\_\_  
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### Acknowledgement

Participants Name Address and ID

We hereby acknowledge the receipt of repurchase/ redemption request for \_\_\_\_\_ no. of securities of \_\_\_\_\_ (security details) from \_\_\_\_\_ (Name) holding a/c no. \_\_\_\_\_

\_\_\_\_\_  
**Depository Participant's Signature** \_\_\_\_\_ **Seal** \_\_\_\_\_ **Date** \_\_\_\_\_