# For conversion of existing Mutual Fund Units represented by Statement of Account into electronic (Destatementized) form

| UNION BANK OF INDIA _____ BRANCH |
|---|

(To be filled up by the Depository Participant)

| DRF No. | | Date | D | D | M | M | Y | Y | Y | Y |
|---|---|---|---|---|---|---|---|---|---|---|

(To be filled by the BO. Please fill all the details in **BLOCK LETTERS** in English. Fill up a separate DRF for different combination of Names and for different RTAs).

I/We request you to convert (Destatementize) the enclosed Mutual Fund Statement of Account [SoA] registered in my/our name into my/our demat account:

| DP ID | 1 | 3 | 0 | 2 | 5 | 9 | 0 | 0 | Client ID | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Name of First Holder | | | | | | | | | | | | | | | | |
| Name of Second Holder | | | | | | | | | | | | | | | | |
| Name of Third Holder | | | | | | | | | | | | | | | | |

➢ Total Number of pages contained in the Statement of Account: _____

| Folio No. | ISIN | Mutual Fund Name & Units Description | Quantity | | Lock-in Details | | Destatementization Request No. /DRN (To be filled in by DP) |
|---|---|---|---|---|---|---|---|
| | | | In Figures (or) All | In Words (or) All | Reason | Expiry Date | |
| | | | | | | | |
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| | | | | | | | |

➢ Attach an annexure (duly signed by account holder(s)) in the above format if the space is not sufficient.
➢ If all holdings in the Statement of Account are to be destatementized, then "**ALL**" should be mentioned in the Quantity column.

**Declaration by BO(s):** I/We hereby declare that the abovementioned MF units are registered in my/our name(s) and are not already destatementized and no certificates issued against these MF units. I/We also hereby declare that the units requested by me/us for conversion into destatementized form are free from any lien or charge or encumberance and represent the bonafide units of the Issuer to the best of my/our knowledge and belief.

| | **First / Sole Holder** | **Second Holder** | **Third Holder** |
|---|---|---|---|
| Name | | | |
| Signature with DP | | | |
| Signature with RTA | | | |

**Depository Participant Authorization** (From DP to RTA)

We have received the above-mentioned Statement of Account [SoA] for conversion into Destatementized form. It is also certified that the holder(s) of the SoA have a beneficial account with us in the same name(s) and order of name(s) as mentioned above.

**Depository Participant Seal and Signature**

=======================(Please tear here)==== =======================

**Acknowledgement Receipt**

We hereby acknowledge the receipt of the following MF units requested for conversion (Destatementization) by Mr./Mrs./Ms. _____ having BOID _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ with us.

| Folio No. | ISIN | Mutual Fund Name & Units Description | Quantity | | Lock-in Details | | Destatementization Request No. /DRN (To be filled in by DP) |
|---|---|---|---|---|---|---|---|
| | | | In Figures (or) All | In Words (or) All | Reason | Expiry Date | |
| | | | | | | | |
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| | | | | | | | |

➢ Total Number of pages contained in the Statement of Account: _____

**Depository Participant Seal and Signature**