Form No. A

Format for Declaration of Self Certification for Corporate ARN Holder who does not have subbrokers

On appropriate letterhead of corporate body

Date					
AMFI Regist	ration Nu	ımber (ARN):			
From: Name	e of the A	RN Holder:			
* Landline	:		-		
* Mobile	:		-		
* Email	:		-		
To CAMS, AMF	l Unit				
Sub: Declar	ation of S	elf-Certification (DSC): Period	/ Financial Year	_
during the pof Conduct of and prescribeno. MFD/C	period / fi contained ped by AN C1R/20/23	nancial year ended M I in SEBI circular no. SI NFI from time to time	arch 31, EBI/IMD/CIR No. 81174 and to the requirement wember 28, 2002 and	ibution of mutual fund production, we have adhered to the Co 4648/2009 dated August 27, 20 onts as prescribed in SEBI's circuthe AMFI circular no: CIR/AR	de 09 Iai
disclosed to	investor us for the	s all the commission	s (in the form of trail schemes of various m	109 dated June 30, 2009, we ha commission or any other modutual funds from amongst whi	le
We also cer AMFI Guide	•	we have complied wit	h the Know Your Distr	ibutor (KYD) requirements as p	eı
capacity / incidental to	relationsh o our prin under F	nip as distributor(s), nary activity of distrib Regulation 4 (d) of S	we may provide in ution of mutual fund p	tered with AMFI and that in convestment advice to our clien products, which is exempted fronge Board of India (Investme	ts om
We further issued from	-		lerstood and adhered	to the SEBI and AMFI Guidelin	es
Kindly upda	te this DS	C on your records and	d with all the Fund Hou	uses where we are empanelled.	
For		(firm name)		

Authorised Signatory (ies)

^{*} Information of principal contact desirable for all important communication to be disseminated efficiently