

To whomsoever it may concern:

I/We hereby confirm the following details regarding the instrument issued by us:

1 INSTRUMENT DETAILS																				
Instrument Type	<input type="checkbox"/> Demand Draft	<input type="checkbox"/> Pay Order / Banker's Cheque	<input type="checkbox"/> Debit to Account	Date <table border="1"><tr><td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr></table>	D	D	M	M	Y	Y	Y	Y								
D	D	M	M	Y	Y	Y	Y													
1. Instrument Number	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>							Instrument Amount (in Rs.)	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>											
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Instrument Amount (in words) _____																				
In Favour of / Favours _____																				
Payable at _____																				

2 DETAILS OF BANK ACCOUNT DEBITED FOR ISSUING THE INSTRUMENT																																		
1. Bank Account Number	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>											A/c. Type (✓) <input type="checkbox"/> Current <input type="checkbox"/> Savings <input type="checkbox"/> NRO <input type="checkbox"/> NRE <input type="checkbox"/> FCNR	Bank Name/Branch _____																					
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Name of Sole/1st Unit Holder _____																																		
Folio No. _____																																		
	First Unit Holder	Second Unit Holder	Third Unit Holder																															
PAN/PEKRN**	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>											<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>											<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>											
KIN*	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>											<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>											<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>											
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D	D	M	M	Y	Y	Y	Y																											
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Mobile No. +91	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>											E-mail ID	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																					

KYC is mandatory. Please enclose copies of KYC acknowledgement letters for all applicants. **PEKRN required for Micro investments upto Rs. 50,000 in a year. * 14 digit KYC Identification Number (KIN) and Date of Birth is mandatory for Individual(s) who has registered under Central KYC Records Registry (CKYCR).

3 IF THE ISSUING BANK BRANCH IS OUTSIDE INDIA					
I/We further declare that I/we are registered as a Bank/branch as mentioned below:					
Under the Regulator	_____			Name of Regulator	_____
In the Country	_____	Country Name	_____	Registration No.	_____
Registration Number _____					
I/We confirm having carried out necessary Customer due diligence with regard to the Beneficiary and to the source of the funds received from him, as per the standards of Anti-Money Laundering laws and other applicable relevant in our country.					

4 BRANCH MANAGER/DECLARANT(S)														
Name	_____			Employee Code	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>									
Address	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>													
City	_____			Pin Code	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>									
State	_____			Country	_____									
Contact No.	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>													
✗ Signature			Bank & Branch Seal (mandatory)											

Important Note: If it is clarified that the bankers certificate suggested above is recommendatory in nature as there may be existing Bank Letters / Certificates / Declarations which will conform to the spirit of the required details are mentioned in the certificate

Mutual Fund investments are subject to market risks, read all scheme related documents carefully.

CALL US AT				
Please visit our website www.assetmanagement.hsbc.co.in for an updated list of Official Points of Acceptance of HSBC Mutual Fund. Please visit www.camsonline.com for an updated list of Official Points of Acceptance of our Registrar / Transfer Agent : Computer Age Management System.				
TOLL FREE NUMBERS				
Description	Investor related queries	Distributor related queries	Online related queries	Investor (Dialing from abroad)
Toll Free Number	1800-4190-200 / 1800-200-2434	1800-419-9800	1800-4190-200 / 1800-200-2434	+91 44 39923900
Email ID	investor.line@mutualfunds.hsbc.co.in	partner.line@mutualfunds.hsbc.co.in	onlinemf@mutualfunds.hsbc.co.in	investor.line@mutualfunds.hsbc.co.in