



## ASSOCIATION OF MUTUAL FUNDS IN INDIA

Naman Corporate Link, Wing C, Unit No. 701, Plot Nos. C-31 / C-32, G Block,  
Bandra Kurla Complex, Bandra – East, Mumbai – 400 051.

### Form for providing the details to AMFI.

Name of the Distributor	
ARN	
Tax status of the Distributor	
Address1	
Address2	
City	
Pin code	
Telephone Number (Residence)	
Telephone Number (Office)	
Mobile Number:(1)	
Mobile Number:(2)	
Mobile Number:(3)	
Mobile Number:(4)	
Mobile Number:(5)	
Email Id(1)	
Email Id(2)	
Email Id(3)	
Email Id(4)	
Email Id(5)	
PAN	
ARN Valid From	
ARN valid till	
KYD complied status	
<b>Bank Mandate (1): (Default)</b>	
Bank Name	
Branch Name	
Ac Type	
Ac No	
IFSC Code	
ECS No	
Bank Address1	
Bank Address2	
Bank City & Pin code	
Bank State & Country	
<b>Bank Mandate (2):</b>	
Bank Name	
Branch Name	
Ac Type	
Ac No	
IFSC Code	
ECS No	

Bank Address1	
Bank Address2	
Bank City & Pin code	
Bank State & Country	
<b>Bank Mandate (3):</b>	
Bank Name	
Branch Name	
Ac Type	
Ac No	
IFSC Code	
ECS No	
Bank Address1	
Bank Address2	
Bank City & Pin code	
Bank State & Country	
<b>Bank Mandate (4):</b>	
Bank Name	
Branch Name	
Ac Type	
Ac No	
IFSC Code	
ECS No	
Bank Address1	
Bank Address2	
Bank City & Pin code	
Bank State & Country	
<b>Bank Mandate (5):</b>	
Bank Name	
Branch Name	
Ac Type	
Ac No	
IFSC Code	
ECS No	
Bank Address1	
Bank Address2	
Bank City & Pin code	
Bank State & Country	
<b>Note: 1. Please provide proof of address if the same is different from the one already registered</b>	
<b>Note 2. Please provide a cancelled cheque for the accounts mentioned above.</b>	

**Signature**

**Date:**

**For corporate distributors the above data should be provided by the authorized signatory along with the official stamp.**