

**DP ID IN 301485** 

**REPURCHASE / REDEMPTION FORM (FORM - 7)** 

**RRN** 

## KIFS TRADE CAPITAL PRIVATE LIMITED

**Date** 

H.O.: KIFS CORPORATE HOUSE, 4th Floor, Iskon-Ambli Road, Nr. Ashok Vatika BRTS, Ambli, Ahmedabad – 380058. Gujarat. India. Phone No.079-69240000 to 09.

I/We offer the below mentioned securities for repurchase/ redemption and declare that my/our account be debited by the number of

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	-	-	emption request and ma elow mentioned person(s				
Client ID							
Name of the Holder					I	Signature	
Sole/First Ho	lder						
Name							
Second Holde	er						
Name							
Third Holder							
Name							
Type Of Secu	ırity	MF Units/Othe	ers (please specify)				
ISIN	Mutu	ıal Fund /		Quantity			
15111	Issuer Name		(No. of Securities	(No. of Securities to be Repurchase		RRN (Repurchase / Redemption Request Number)	
			In Figure	In Words	In Words	(To be filled in by	
				(Integers)	(Fractions)	Participant)	
Note: In case the space	e is found	to be insufficient, a du	ly signed annexure containi	ng the aforesaid details	in the same format	may be attached.	
account has sufficie	nt balance	es to accept the repu	of the beneficial owner's archase/ redemption requeste beneficial owners as ex	est. It is also certified	that the beneficia		
Forwarded by:	Name						
Si	gnature				(Seal)		
			Acknowledgm				
		KIFS CORPORA	TRADE CAPITAL P TE HOUSE, 4th Floor bad – 380058. Gujarat.	, Iskon-Ambli Road	d, Nr. Ashok Vat		
We hereby acknowl	-		e/ redemption request for s) from			olding a/c no.	
Participant's Signatu	ire						
Date					(	(Seal)	