

Common Transaction Form

This Form is for use by existing Unit holders. Please use separate form for each Scheme/Plan.

App. No.

Distributor's Name and ARN No. Ganesh S. Shanbhag | ARN - 0988

Sub-Broker/Branch Code _____

Upfront commission shall be paid directly by the investor to the AMFI registered distributor based on the investor's assessment of various factors including the service rendered by the distributor.

UNIT HOLDER INFORMATION

Folio No. _____

Name of first unit holder

(Mr./Ms./Mrs./M/s/Others) _____ First Name _____ Middle Name _____ Last Name _____

PAN (Mandatory) _____ Please KYC (Mandatory - Please attach proof)

Name of Guardian (if first unit holder is a minor)

(Mr./Ms./Mrs./M/s/Others) _____ First Name _____ Middle Name _____ Last Name _____

PAN (Mandatory) _____ Please KYC (Mandatory - Please attach proof)

Name of second unit holder

(Mr./Ms./Mrs./M/s/Others) _____ First Name _____ Middle Name _____ Last Name _____

PAN (Mandatory) _____ Please KYC (Mandatory - Please attach proof)

Name of third unit holder

(Mr./Ms./Mrs./M/s/Others) _____ First Name _____ Middle Name _____ Last Name _____

PAN (Mandatory) _____ Please KYC (Mandatory - Please attach proof)

PoA holder details (If the investment is being made by a Constituted Attorney please furnish Name and PAN of PoA holder)

(Mr./Ms./Mrs./M/s/Others) _____ First Name _____ Middle Name _____ Last Name _____

PAN (Mandatory) _____ Please KYC (Mandatory - Please attach proof)

ADDITIONAL PURCHASE REQUEST

Scheme _____

Plan _____ Option _____

Facility _____ Dividend Frequency (where applicable) _____

Investment Amount _____ DD Charges (if applicable) _____ Net Amount in Figures _____ Net Amount in Words _____

Rs. _____ Rs. _____ Rs. _____

Cheque/DD No. _____ Dated _____ Drawn on Bank _____

Branch _____

Account Type (please Savings Current NRE NRO FCNR Others _____

SWITCH REQUEST

From Scheme _____

Plan _____ Option _____

Facility _____ Dividend Frequency (where applicable) _____

To Scheme _____

Plan _____ Option _____

Facility _____ Dividend Frequency (where applicable) _____

Amount Rs. _____ OR No. of Units _____ OR All Units

REDEMPTION REQUEST

Scheme _____

Plan _____ Option _____

Facility _____ Dividend Frequency (where applicable) _____

Amount Rs. _____ OR No. of Units _____ OR All Units

CHANGE OF CONTACT DETAILS (Refer Instruction 11 for KYC compliant cases)

New Address _____

City _____ Pin Code _____ State _____ Country _____

Tel. (O) ISD / STD (R) ISD / STD Fax ISD / STD Mobile ISD

email id _____

CHANGE OF DEFAULT BANK MANDATE (Mandatory to attach cancelled cheque leaf of the bank account mentioned hereunder)

Multiple Bank Accounts Registration Form to be used to register/make changes to multiple bank accounts.

New Bank Account No. _____ Account Type (please Savings Current NRE NRO FCNR Others _____

Bank _____

Branch _____ City _____

MICR Code _____ IFSC Code _____

(This is 9 digit number next to your Cheque No.) (This is 11 digit alpha numeric number on your cheque) ...continued overleaf

Morgan Stanley

ACKNOWLEDGEMENT SLIP
(To be filled in by the Unit holder)

App. No.

Received from : Folio No. _____ Name of Unit holder _____

Scheme _____

 Additional Purchase or SIP Total Amount (Rs.) _____ Total Cheques _____

Cheque No(s) from _____ to _____ Drawn on _____

 Redemption or Switch Amount (Rs.) _____ OR Units _____ STP or SWP Change of Contact Details Change of Default Bank Mandate Investor Facilities Nomination

This acknowledgement slip is for unit holders reference only. Information provided in the form will be considered as final.

Collection centre/ISC stamp,
date & signature

INVESTOR FACILITIES

The AMC will by default send the Account Statement, Annual Report and Other Statutory Information by email, if provided. However, you may request for physical copies by ticking the following options (Please Account Statement Annual Report Other Statutory Information

I/We would like to apply for a PIN (this would enable to access your account via internet and phone) (Please

SYSTEMATIC INVESTMENT PLAN (Only for SIP applications through post dated cheques; Refer instruction 12(b) for SIP application through ECS)

Separate Cheque required for investment in different Scheme/Plan. All Cheques should be of same date of the months/quarters.

For Micro SIP Investment, kindly furnish the type of photo identification document enclosed _____ (Refer Instruction 6b)

Scheme _____
 Plan _____ Option _____
 Facility _____ Dividend Frequency (where applicable) _____
 Each SIP Amount Rs. _____ (Minimum Rs. 1000) SIP Frequency Monthly or Quarterly SIP Date 1st 5th 10th 15th 20th 25th (please) (one or multiple SIP dates can be chosen)
 SIP Period From MM YYYY To MM YYYY Cheque Nos. From _____ To _____ (minimum six cheques)
 Drawn on Bank _____ Branch _____ City _____
 Account Type (Please Savings Current NRE NRO FCNR Others _____ (please specify)

SYSTEMATIC TRANSFER PLAN (STP) (To be submitted at least 7 days before the 1st due date for transfer)

Transfer From Scheme _____ Plan _____
 Option _____ Facility _____ Dividend Frequency _____
 Transfer To Scheme _____ Plan _____
 Option _____ Facility _____ Dividend Frequency _____ Amount per instalment Rs. _____
 Transfer period from MM YYYY to MM YYYY STP Frequency Daily* or Monthly or Quarterly STP Date 1st 5th 10th 15th 20th 25th (please) (one or multiple STP dates can be chosen)
 *Available for Liquid Fund only

SYSTEMATIC WITHDRAWAL PLAN (SWP) (To be submitted at least 7 days before the 1st due date for withdrawal)

Scheme _____ Plan _____
 Option _____ Facility _____ Dividend Frequency _____
 Withdrawal Options Fixed Amount Rs. _____ OR Fixed No. of Units _____
 Withdrawal period from MM YYYY to MM YYYY SWP will take place on the 1st business day of every month.

NOMINATION/CANCELLATION

I/We do hereby nominate the person more particularly described hereunder/and cancel the nomination made by me/us earlier.

Sr. No.	Name and Address of Nominee(s)*	Date of Birth	Name and Address of Guardian	Signature of Guardian	Proportion [^] (%)
1.	Nominee 1				
2.	Nominee 2				
3.	Nominee 3				

*Maximum three nominees will be allowed

[^]Should aggregate to 100%. Would be allocated in equal proportion if left blank.

DECLARATION AND SIGNATURES

I/We have read and understood the contents of Statement of Additional Information and Scheme Information Document of the Scheme(s) and Addenda issued till date. I/We have neither received nor been induced by any rebate or gifts, directly or indirectly in making this transaction. I/We confirm that the ARN holder has disclosed to me/us all the commissions (in the form of trail commission or any other mode), payable to him for the different competing Schemes of various Mutual Funds from amongst which the Scheme is being recommended to me/us.

SIGNATURES (ALL UNIT HOLDERS must sign here)

Date DD MM YYYY

 Sole/First Unit holder*/Guardian / PoA Holder

 Second Unit holder*

 Third Unit holder*

*All Unit holders must sign in the same order as they are registered with MSMF. In case all Unit holders do not sign the application is liable to be rejected.

INSTRUCTIONS

- This form is for use by existing Unit holders for all Schemes of Morgan Stanley Mutual Fund (MSMF).
- Unit holders should refer to the Statement of Additional Information and Scheme Information Document, Addenda & KIM of the respective Scheme(s) carefully before filling the Application Form.
- Transaction requests must be signed by all the Unit holders if the mode of holding is "Joint". In case the mode of holding is "Anyone or Survivor", any one of the joint holders may sign.
- Completed forms should be submitted to your investment advisor or nearest Morgan Stanley Mutual Fund branch office or Karvy Investor Service Centre (ISC).
- As per SEBI guidelines, it is mandatory for the investors to furnish their bank account details. Please verify the accuracy of the bank details.
- It is mandatory to attach the KYC Acknowledgement Letter for all applicants (including Joint holders, PoA holders, and Guardians in case of minor), along with the Transaction Form while investing for the first time in every folio. This will be applicable for all Unit holders (both individual and non-individual). For details, please refer to the Scheme Information Document, and or contact any ISC of MSMF.
- Effective August 01, 2009, SIPs up to Rs. 50,000/- per year per investor at Fund House level i.e. aggregate of installments in a rolling 12 month period or in a financial year i.e. April to March [to be referred as "Micro SIP"] shall be exempt from the requirement of PAN. This exemption shall be applicable to investments by individuals [including NRIs], minors, and sole proprietary firms. Such exemption shall be applicable to joint holders also. However, PIOs, HUFs, Partnership Firms, Companies, Societies, Trusts and any other category of investors investing up to Rs. 50,000/- as above shall not be eligible for such exemption. Further, this exemption will not be applicable for lump-sum purchase transaction up to Rs. 50,000/- which will continue to be subject to PAN requirement.
- MSMF will not be held responsible for errors or delays in processing your request due to errors in information provided.
- Additional Purchase and payment details:**
 - Unit holders should fill the name of the scheme, plan and option clearly. In case the Unit holder does not fill the plan/option/sub-option properly and clearly or in case of incomplete details, non clarity or ambiguity, default option will be considered and applied.
 - All cheque, demand draft, pay orders should be crossed "Account Payee only" and made favouring "Morgan Stanley Mutual Fund A/c Scheme Name".
 - Separate cheques should be given for investment in each scheme, plan or option. Unit holders residing in locations where Investor Service Centres or Collection Centres are not located are requested to make payment by demand drafts. DD charges for such investors will be borne by AMC, subject to the maximum amount specified in the Scheme Information Document or as specified by the AMC from time to time.
- Redemption request:**
If redemption request exceeds the balance in the account, the entire units will be redeemed.
- Switch:**
Value of the switch must confirm to the minimum initial/additional subscription requirement for the relevant switch-in scheme, and will be subject to applicable load structure of the concerned Schemes.
- Change of Contact Details:**
Investors who have furnished their KYC acknowledgement letter, and may thereafter wish to furnish a request for change of address, should send a request along with proof for new address to any point of service centre of CDSL Ventures Ltd. for effecting the change.
- Systematic Investment Plan (SIP):**
 - The date of the first cheque shall be the same as the date of the application while the remaining (minimum 5 cheques) shall be post dated cheques (dated uniformly either the 1st, 5th, 10th, 15th, 20th, 25th of a month or quarter).
 - SIP application through ECS will need to be applied through a separate form available on our website or any ISC of Morgan Stanley Mutual Fund.
- Systematic Transfer Plan (STP):**
 - The minimum amount in rupees for transfer under the STP facility is Rs. 1000. The transfer will commence from the date mentioned by the Unit holder in the Application Form for the facility and will take place on specified dates.
 - A minimum period of 7 days is required for registration under STP. The Units will be allotted/redeemed at the Applicable NAV of the respective dates of the Schemes on which such investments/withdrawals are sought from a scheme after levying applicable taxes.
- Systematic Withdrawal Plan (SWP):**
 - The minimum amount in rupees for withdrawal under the SWP facility is Rs. 1000. The withdrawal will commence from the date mentioned by the Unit holder in the Application Form for the facility and will take place on the 1st business day of every month.
 - A minimum period of 7 days is required for registration under SWP. The Units will be redeemed at the Applicable NAV of the respective dates of the Schemes on which such withdrawals are sought from the scheme after levying applicable taxes.