Canara Robeco Mutual Fund

Investment Manager : Canara Robeco Asset Management Co. Ltd. CIN No : U65990MH1993PLC071003 Construction House, 4th Floor, 5, Walchand Hirachand Marg, Ballard Estate, Mumbai 400 001. Tel.: 6658 5000, Fax: 6658 5012 / 13, www.canararobeco.com



FOLIO CONSOLIDATION REQUISITION	
(For existing Unitholders only)	
	Date: D D M M Y Y Y Y
To, Canara Robeco Mutual Fund	
Dear Sir/s,	
I/We request you to consolidate all my/our investments in the below mentioned folio numbers into a single folio (Target Folio).	
Source Folio Number/s for Consolidation:	
a.	b.
c.	d.
e.	f.
g.	h.
Target Folio No. into which all folios need to be consolidated (specify any one from the above)	
raiget rollo No. Into which all folios need to be to isolidated (specify any one not	in the above,
I/We understand that consolidation of folios will be effected only if the following information is identical in all folios specified by me/us:	
Name of Unit Holder(s)/PANBank detailsOrder of Unit HoldersAddress	 Mode of Holding Nominee Name/s
prevail after consolidation. I/We also confirm that there is no pledge / lien marked in these folios and acknowledge that such folios will require the financier's consent for consolidation and hence those folios may be ignored for consolidation, if I/we have mentioned any such folio(s). Declaration and Signatures: I/We hereby declare and confirm that the information provided in this form is true and correct and is duly supported by the document proof enclosed along with the form. I/We further agree and confirm that in the event there is any discrepancy between the information provided herein and the supporting documents, the AMC/Mutual Fund shall be entitled to reject the form. The AMC/Mutual Fund shall not be liable and/or responsible for any loss or damage that I/we may incur if the Form is rejected.	
Name of the First Unitholder	First Unitholder
Name of the Second Unitholder	Second Unitholder Third Unitholder
Name of the Third Unitholder	Third Unitholder
Note: All unit holders need to sign irrespective of mode of holding.	
Acknowledgement	Date: D D M M Y Y Y Y
Received, subject to verification, request for consolidation of folios from	
Mr. / Ms. / M/s.	
Source Folio Number Source Folio Number	
a. b. b.	
c. d. d.	
e. f.	Receiving Office's
g. h. h.	Stamp And Signature
Target Folio No.	