

FORM L-35-DOWNGRADING OF INVESTMENTS - 2

Company Name & Code:

Statement as on :30 Sep 2017

Name of Fund Life Fund

Statement of Down Graded Investments

Periodicity of Submission: Quarterly

Rs. Lakhs

No	Name of the Security	COI	Amount	Date of Purchase	Rating Agency	Original Grade	Current Grade	Date of Downgrade	Remarks
A.	<u>During the Quarter</u> ¹								
						-----NIL-----			
B.	<u>As on Date</u> ²								

CERTIFICATION

Certified that the information given herein are correct, complete and nothing has been concealed or suppressed, to the best of my knowledge and belief.

Date : Oct 6 ,2017

Signature _____

Full Name and Designation Satishwar Balakrishnan

Chief Financial Officer

Note:

- 1 Provide Details of Down Graded Investments during the Quarter.
- 2 Investments currently upgraded, listed as Down Graded during earlier Quarter shall be deleted from the Cumulative listing.
- 3 FORM-2 shall be prepared in respect of each fund. In case of ULIP FORM 1 shall be prepared at Segregated Fund (SFIN) level and also at consolidated level.
- 4 Category of Investmet (COI) shall be as per Guidelines issued by the Authority

FORM L-35-DOWNGRADING OF INVESTMENTS - 2

Company Name & Code:

Statement as on :30 Sep 2017

Name of Fund Unit Linked Fund

Statement of Down Graded Investments

Periodicity of Submission: Quarterly

Rs. Lakhs

No	Name of the Security	COI	Amount	Date of Purchase	Rating Agency	Original Grade	Current Grade	Date of Downgrade	Remarks
A.	<u>During the Quarter</u> ¹								
						-----NIL -----			
B.	<u>As on Date</u> ²								

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Signature _____

Date : Oct 6 ,2017

Full Name and Designation Satishwar Balakrishnan

Chief Financial Officer

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FORM L-35-DOWNGRADING OF INVESTMENTS - 2

Company Name & Code:

Statement as on :30 Sep 2017

Name of Fund Pension and General Annuity Fund

Statement of Down Graded Investments

Periodicity of Submission: Quarterly

Rs. Lakhs

No	Name of the Security	COI	Amount	Date of Purchase	Rating Agency	Original Grade	Current Grade	Date of Downgrade	Remarks
A.	<u>During the Quarter</u> ¹								
						-----NIL -----			
B.	<u>As on Date</u> ²								

CERTIFICATION

Certified that the information given herein are correct, complete and nothing has been concealed or suppressed, to the best of my knowledge and belief.

Date : Oct 6 ,2017

Signature _____

Full Name and Designation Satishwar Balakrishnan

Chief Financial Officer

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