Disclosure of actions taken against MFDs related to misconduct by UTI AMC	
Particulars	**Inputs to be filled by AMC**
1. Name of the Mutual Fund	UTI Mutual Fund.
2. ARN of the MFD	NIL.
3. Name of the MFD	NA
4. Name of the employee of the MFD involved	NA
5. EUIN of the employee of the MFD involved	NA
6. Source of the complaint (to be selected from drop down menu)	NA
7. Nature of Mis-Selling observed by the AMC (to be selected from drop down menu)	NA
8. Summary of the incident	No incidence during the quarter July-September 2025.
9. Amount of investment Involved in the incident	NA
10. Corrective Action taken by the AMC prevent recurrence	NA
11. Code of Conduct Violation (other than mis-selling) if any	NA
12. Action taken by the AMC against the errant MFD	NA