DEMATERIALISATION REQUEST FORM (To be submitted in Duplicate)

DP ID: IN 302574

For office use only

Corporate Office: 909, Chiranjiv Tower,43 , Nehru Place, New Delhi-110019							Branch	coae & N	iame					
Tel: 2628 9478, 2622 3712 Fax: +91-11-2622 3014 E-mail ID: inmacs.dp@gmail.com								Sr. No.						
								Date.	Date.					
								DRN _			(to be	filled in	by the DP	
We request you to dematerialise the e	nclosed co	ertificate	e(s) into	my/our	accou	ınt as p	er deta				—			
Client Id					\top						\top		\top	
Sole/First Holder Name														
Second Holder Name														
Third Holder Name														
Company Name														
Type of Security			Equity / Others (Please specify)											
Quantity to be dematerialised (in figures)		de Astronomy (secondary)												
·	words)													
Face Value														
SIN (To be Filled in by the DP)		ı	N									\Box		
Detail of securities :														
						_	1 1 001	ad in Coou	rition					
Free Securities	Easte No.					LOCK	ed -in-Securities Distinctive Nos.							
Folio No.	From			ficate Nos.				om	To			Quantity		
FIOII	1		10	J			FIC)III		10		+-		
												+-		
		1		7								+-		
												+-		
												+-		
Total No. of Certificates :														
Detail of Locked-in-Securities:														
Lock-in-reason														
_ock-in-release date														
n case the space found to be insufficient, an anne.	xure containir	ng the certi	ficate deta				be attach	ed. please use s	separate fo	rm or free s	ecurities a	and locke	ed-in-securities	
Ve hereby declare that the above mentioned securit	ies are registe	ered in my/o	our name.		laration al certific		nereby su	rrendered by me	/us for dem	aterialisatio	on. I/We al	so hereb	y declare that t	
curities surrendered by me/us for dematerialisation	are free from	any lien or o		ncumbrar			the bona	fide securities of	the compa	ny to the be	st of my/ou	ur knowle	dge and belief	
Sole/First Holder		Seco	nd Hold		Joigin			Thi	rd Hold	er				
Ne have received the above mentioned securities fo	ur domotorialia	ation The		icipant				ourrandared for	domotoriali	nation and u	vo cortifut	hat the a	anlication form	
accordance with the details mentioned in the enclose												nat tric ap	phoationform	
Name of the Executive :														
Signature :										Paı	rticipar	ıts's S	tamp & Da	
				(NOW										
		I	NM.	ACS	LI	MI'	ΓEΓ)						
Corporate Office: 909, Chiranji	v Tower, 4								262237	'12 Fax	: +91-1	1-262	23014	
serial No.											Date	<u> </u>		
We hereby / acknowledge the receipt	of		Sha	ares / ur	nits / b	onds /	debent	ures of						
surrendered for dematerialisation by M	1r. / Ms. / N	Л/s								Having	, client	ld		