

Reasons for Off Market / Inter DP transfer of shares with effect from January 30, 2021

(Select any one reason only)

Demat A/c No. : _____ Slip No. _____ Date: _____

Dear Sir,

I/We, the holder/s of above mentioned Demat account no, do hereby solemnly affirm and declare that Slip No. and details mentioned in same is issued by me/us:

| | | | |
|-------------------------|--|-------------------------|--|
| Counter DP name: | | Counter BO name: | |
|-------------------------|--|-------------------------|--|

- | | |
|--|--|
| <input type="checkbox"/> Transfer to own account(s) | <input type="checkbox"/> Gift |
| <input type="checkbox"/> Transfer from Nominee / Surviving holder to the beneficiary | <input type="checkbox"/> Donation |
| <input type="checkbox"/> Open Offer for Acquisition | <input type="checkbox"/> For Buy-Back |
| <input type="checkbox"/> Erroneous Transfer Pertaining to Client Securities | <input type="checkbox"/> Transposition |
| <input type="checkbox"/> Redemption of Mutual Fund units | <input type="checkbox"/> Off-Market Swap |
| <input type="checkbox"/> Change of nominee shareholder appointed under section 187(1) of Companies Act, 2013 | |
| <input type="checkbox"/> Implementation of Govt / Regulatory Direction / Orders | |
| <input type="checkbox"/> Merger/Demerger of Corporate entity | - Supporting documents required |
| <input type="checkbox"/> Dissolution/ Restructuring/Winding up of Partnership firm/Trust | - Supporting documents required |
| <input type="checkbox"/> Trust to Beneficiaries/On HUF dissolution to Karta & Coparceners | - Supporting documents required |
| <input type="checkbox"/> Conversion of Depository Receipt (DR) to underlying Securities and vice versa | |
| <input type="checkbox"/> Transfer between Minor Account and Guardian Account | |
| <input type="checkbox"/> Transfer between Partner and Firm, or Director and Company | |
| <input type="checkbox"/> Delisting - Exit offer | |
| <input type="checkbox"/> Deposit of securities with Escrow Agent and its return | |
| <input type="checkbox"/> Transfer between specified family members (Tick the option from below, if this option is used) | |

| | | | | | |
|--------------------------|--------------------------------|--------------------------|--------------------|--------------------------|-----------------------------------|
| <input type="checkbox"/> | Father (including step-father) | <input type="checkbox"/> | Daughter | <input type="checkbox"/> | Brother (including step-brothers) |
| <input type="checkbox"/> | Mother (including step-mother) | <input type="checkbox"/> | Spouse | <input type="checkbox"/> | Sister (including step-sisters) |
| <input type="checkbox"/> | Son (including step-son) | <input type="checkbox"/> | Son's wife | <input type="checkbox"/> | Members of same HUF |
| <input type="checkbox"/> | | <input type="checkbox"/> | Daughter's husband | <input type="checkbox"/> | |

- For off market Sale / Purchase Consideration Amount Rs. _____
(Below details are mandatory if this option is used)

| | Bank details | | Bank details |
|------------------------------------|--------------|---------------------------------------|--------------|
| Payment Mode (Cheque/NEFT/RTGS) | | Counter Client Bank A/C No. | |
| Counter Client Bank Name | | Counter Client Bank's Branch Name | |
| Counter Client Name | | Date of Issue of cheque / Transfer | |
| Cheque / Reference No. | | | |

Signature of First Holder

Signature of Second Holder

Signature of Third Holder