

Rematerialization Request Form [RRF]

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	filled up																						
RRN													Dat	:e		D	D	M	M	/ }	/	Υ	Υ
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RRF No	o.												Dat	:e		D	D	M	M	/	/	Υ	Υ
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DP ID										Client			ID										
Name o	f the Co	mpany																					
ISIN					I	N																	
Type of	Security	1				Equity Units	1			entur er (S		_	□ Bor	nds									
Number of Securities to Be Rematerialized					figure																		
					In '	In Words																	
Type of						☐ Market Lot. ☐ Jumbo Lot. (Specify Denomination)																	
Type of		es				Free		Loc	k-in														
Lock-in							1							1					1		-		
Lock-in						D		D		IV		1	VI.		Υ		Υ			Y		Υ	
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Details	of Exist	ing Fol	lio (if	any)																			
* In c	ase of r	emat	for r	epurc	hase	, For	m p	rov	ided	by t	he r	espe	ctive	cor	npar	ny s	hou	ld b	e atta	ache	d a	lon	g with

ith the RRF

	First/Sole Holder	Second Holder	Third Holder
Name			
Signature as per RTA Records			
Signature as per DP Records			

 $\textbf{Email:} \ \underline{cuatomercare@krchoksey.com} \ \ \textbf{Website} : \underline{www.krchoksey.com}$



Participant Authorization - DP to RTA

Type of Security

Received the above mentioned securities for Rematerialization, from:

DP ID							С	lient	ID									
Name of the Sole / First Holder																		
ISIN	1	N								Date	D	D	M	M	Υ	Υ	Υ	Υ

The Rematerialization Request form has been verified with the details of the Beneficial Owner's account and it is certified that the form is in order. The account has sufficient balances to allow the Rematerialization as requested. It is also certified that the details of beneficial owners have been verified and found in order.

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-=====================================															=							
Received Remater	rializa	tion r	eques	st for	m a	s per	r de	etails	given	below	:											
RRF No.												Date		D	D	M	M	Υ	Υ	Υ	Υ	
OP ID										Clien	t ID											
Name of the Sole /	First	Hold	er																			
Name of Second jo	int Ho	older																-	-	-		
Name of Third join	t Hold	ler																				
SIN I N								Qι	antity													
Name of the Company / Security										<u> </u>												1

Depository Participant Seal and Signature

Email: cuatomercare@krchoksey.com Website: www.krchoksey.com