CDBL Bye Laws Form 21

Pay In Transfer Form

Please complete all details in CAPITAL letters. **Please fill all names correctly.** All communication shall be sent **only** to the First Named Account Holder's correspondence address.

		Date (DDMMYYYY)	
1. Transferor Details			
Exchange ID BO ID BO ID *BO Name.			
			2 1 2 11
ISIN	Issuer Con	npany	Pay In Quantity
2. Transferee Details			
Trading ID/ Broker Code **Name of Broker			
3. DECLARATION			
The rules and regulations of the Depository and CDBL Participant pertaining to an account which are in force now have been read by me/us and I/we have understood the same and I/we agree to abide by and to be bound by the rules as are in force from time to time for such accounts. I/We also declare that the particulars given by me/us are true to the best of my/our knowledge as on the date of this transaction. I/We further agree tha any false/misleading information given by me/us or suppression of any material fact will render my/our account liable for termination and furthe action.			
	ants / Authorized signatories in case of ltd Co.	Signature	with date
First Applicant			
Second Applicant			
3 rd Signatory (Ltd C. Only)			
4. To be filled by the DP			
*BO ID(Broker Clearing A/C) Internal Reference No:Pay In Quantity			
*DP ID			
The Pay In Quantity has successfully been transferred to the broker's clearing A/C -			
Name of the CDBL Participant DP Signature			
-		Setup Date(DDMMYYYY)	
		Setup Date(DDI	VIIVI T T T T)

Form revision date: 03/08/2004

^{*}These fields should be checked and matched with system-generated information.