Manashvi Securities Limited

Regd. Office: 524, P.J. Tower, Dalai Street, Fort, Mumbai - 400023. India

Dealing Office Mumbal: 417, Anjani Complex, "A" Wing, Pereira Hill Road, Nr. Cinemax Theatre, Andheri (East), Mumbai-400 099. Tel. 91-22-28253301 (3 Lines) • Fax : 91-22-28253303 • E-mail : manashvi@manashvi.com • Website : www.manashvi.com

Dealing office Gandhinagar: 562/1, "Arambh" Opp. Tejas Society, Sector-23, Gandhinagar- 382 023. Tel.: (079) 23233508, Fax No.: (079) 23248366 • E-mail: gandhinagar@manashvi.com

Application Form for Transposition (TRPF)

(TO BE ATTACHED WITH DRF)

TRPF No.:				Da	ate :						
Please transpose the name							com	pany	ing d	emat i	reque
orm and thereafter credit t	the same in	the demat a	account a	8 UĐIS	illed be		ate :				
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Name of the Company		1					Т	Т	_		Τ
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DP ID			Client ID			-					
Name of the holders (As it ap	pears in the	Demat Acco	unt)			-					
First / Sole Holder Name				,							
Second Holder Name											
Third Holder Name							_				
N	Jame of the	Hoiders (As	s it annes	rs on t	the Cer	rtificat	es)				
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Name (As per demat a/c)											
Signature with DP										<u> </u>	
Signature with RTA		,									

We state that the above details are true to the best of our knowledge

Depository Participant Seal and Signature

- Note: 1) Separate Transposition form should be filled by the Joint holders for securities having distinct ISIN.
 - 2) Please write each combination of names in separate boxes.
 - 3) Use separate transposition form if there are more than three combinations of names.