LIBORD BROKERAGE PVT. LTD.

NOMINATION FORM

(For Individuals only) CDSL

Nomination Regn. No.

Your Depository

Dated

104, M. K. Bhavan	, 300, S	hahid Bhagat	Singh Roa	d, Fort,	Mumbai -	400 001.
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I/We the sole holder / Joint holders / Guardian (in case of minor) hereby declare that:
I/We do not wish to nominate any one for this demat account.
I/We nominate the following persons who is/are entitled to receive security balances lying in my/our account, particulars where of are given below, in the event of my / our death. DO Assount Dataila

BO Account	. Deta	IIS											
DP ID	1	2	0				Client ID	0	0	0			
Name of the	e Sole ,	/ First	Holde	r								-	
Name of Se	cond H	lolder											
Name of Th	ird Hol	der											

Nominee details

Nominee details		 						-														
Nominee Name:			No	mir	nee	1				Nor	nin	ee 2	2				N	om	inee	3		
*First Name																						
Middle Name																						
*Last Name																						
*Address																						
*City																						
*State																						
*Pin																						
*Country																						
Telephone No.																						
Fax No.																						_
PAN									Τ													
UID																						
E-mail ID																						
*Relationship with BO (if any)																						_
Date of Birth (Mandatory if nominee is a minor)																						
Name of Guardian of Nomine (if Nominee is a minor)		-					 1			-				-							 	
*First Name																						
Middle Name																						
*Last Name																						
*Address of the guardian of nominee																						

*City		
*State		
*Country		
*Pin		
Age		
Telephone No.		
Fax No.		
E-mail ID		
*Relationship of the Guardian with the Nominee		
*Percentage of allocation of securities		
*Residual Securities (Please tick any one nominee, if tick not marked the default will be first nominee)		

Note: Residual securities: incase of multiple nominees, please choose any one nominee who will be credited with residual securities remaining after distribution of securities as per percentage of allocation. If you fail to choose one such nominee, then the first nominee will be marked as nominee entitled for residual shares, if any.

* Marked is Mandatory field

This nomination shall supersede any prior nomination made by me/us and also any testamentary document executed by me/us.

Place: _____ Date: _____

I / We have received and read the Rights and Obligations document and terms & conditions and agree to abide by and be bound by the same and by the Bye Laws as are in force from time to time. I / We declare that the particulars given by me/us above are true and to the best of my/our knowledge as on the date of making this application. I/We agree and undertake to intimate the DP any change(s) in the details / Particulars mentioned by me / us in this form. I/We further agree that any false / misleading information given by me / us or suppression of any material information will render my account liable for termination and suitable action.

	First/Sole Holder or Guardian (in case of Minor)	Second Holder	Third Holder
Name			
Signature	Ĩ	Ē	F

(Signatures should be preferably in blue ink).

Note: One witness shall attest signature(s) / Thumb impression(s).

Details of the Witness (Other than account holder, nominee and guardian)												
Names of Witness												
Address of Witness												
Signature of Witness												
W												

(To be filled by DP)

													dat	dated									
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Received nom	eceived nomination from: ACKNOWLEDGEMENT RECEIPT																						
DP ID	1		2	0								Client ID	0	()	0							
Name																							
Address																							
Nomination	in fav	/ou	r of																				
First Nomin	ee																						
Second Non	ninee																						
Third Nomir	nee																						
No Nominat	tion						Does	not	t wis	h to n	ominat	e											
Registration	No.											Regi	stered on		D	D	M	M	Υ	Υ	Υ	Υ	
															•			libore	Due				

For Libord Brokerage Pvt. Ltd.