M/s. _____

_____

_____

Bank Mandate Form

I / We, Mr./ Ms./ Mrs._____ S/o, D/o, W/o, _____ hereby authorize Allied Bank Limited to send /directly credit cash dividends declared by it, in my bank account as detailed below:

(i) Shareholder's Details	
Name of the Shareholder (**Mandatory)**	
Father's / Husband's Name	
Folio # /Participant ID /CDC Investor Account No. (**Mandatory)**	
CNIC NO. / NTN No. **(Mandatory)** (Please attach legible attested Photocopy of valid CNIC)	
Passport No. (in case of foreign shareholder)	
Address (**Mandatory)**	
Email Address	
Telephone Number	Landline No.
	Mobile No. **(Mandatory)**

(ii) Shareholder's Bank Details (Mandatory)	
Bank's Name	
Branch Name and Address	
Branch Code Number	
Title of Bank Account	
Account Number	
International Bank Account Number (IBAN)	

P	K																						

It is stated that the above particulars given by me are correct to the best of my knowledge and I shall keep the Company/ Share Registrar informed in case of any changes in the said particulars in future.

_____

Signature of the shareholder

Encl: **Photocopy of Valid CNIC**

Note: Bank mandate details must be verified by the concerned Bank Branch to avoid any error and to be sent to **The Manager, CDC Share Registrar Services Limited, CDC House, 99-B, Block-B, S.M.C.H.S, Main Shahra-e-Faisal, Karachi** in case of physical shares, whereas CDC Shareholders should send it along with legible photo copy of valid CNIC to Investor Account Services or Broker where their shares are placed in electronic form.