

## DIVIDEND MANDATE FORM

Date:

I hereby wish to communicate my desire to receive my dividends directly in my bank account as detailed below:

1. Name of shareholder/certificate holder: \_\_\_\_\_
2. Folio number: \_\_\_\_\_
3. Postal Address: \_\_\_\_\_
4. Contact number: \_\_\_\_\_
5. Name of Bank: \_\_\_\_\_
6. Bank Branch & full mailing address: \_\_\_\_\_
7. Title of Bank Account: \_\_\_\_\_
8. Bank Account No. (complete with code): \_\_\_\_\_
9. IBAN Number\* (complete with code): \_\_\_\_\_
10. CNIC No. (attach copy) : \_\_\_\_\_
11. NTN (in case of corporate entity, attach copy): \_\_\_\_\_

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

### INDIVIDUAL CERTIFICATE HOLDER(S)

\_\_\_\_\_  
Signature

CNIC No. \_\_\_\_\_  
(copy attached)

### CORPORATE ENTITY

\_\_\_\_\_  
Authorized Signatory(ies)

NTN No. \_\_\_\_\_  
(copy attached)

*(In case Shares held in CDC then please inform concerned Participant / CDC Investor Account Services).*