This form should be completed in duplicate and each involved participant firm should retain a duly completed original to be provided as documentary evidence upon request of the CDS.

CDS 6B

REQUEST FOR INTRA-ACCOUNT TRANSFER OF SECURITIES

Name of Account: ----------
Address: ----------
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(1) I/We* wish to transfer the following securities out of my/our* account No:

With, ----------
whose consent is given below. (Participant's name)

Quantity									Company Code				Type	Sub-Type				Request Key	Ref No.

Signature/s of individual account holder/s / Due signature/s and/or Common Seal for body corporates.

1.---------- 2.---------- 3.----------

Date : ----------

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(2) Name of participant : ----------
We confirm the authenticity of the signature/s of the above Account Holder/s and hereby authorise the transfer of the above mentioned securities out of the above account held through us.
Authorised signature : ----------
Name and Designation : ----------
Date : ----------

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(3) *I/We request that the securities mentioned in (1) above be transferred to my/our* account No:
account No:

With ----------
(participant's name)
Signature/s of individual account holder/s / Due signature/s and/or Common Seal for body corporates.

1.---------- 2.---------- 3.----------

Date : ----------
* Delete accordingly

Request Key to be filled in by the Receiving Broker & Transfer Reference number to be filled in by Sending Broker

Authorised Signature and Stamp of Participant