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: _____

_____

(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 : _____

---

(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