

Sr. No. (DIS No.)





MEMBER: BSE NSE DP: CDSL

REGD. OFFICE: ARHAM FINANCIAL CENTRE PANCHNATH MAIN ROAD, HARIHAR CHOWK, RAJKOT - 360 001. GUJ. (INDIA) TEL.: 0281-2450745 FAX: 0281-2450758 email: ans@anspl.net CIN-U67120GJ1999PTC035472

Annexure for Off Market Transfer

Required compulsory additional information for off market transfer as per CDSL *(ONLY for transfers from BO (Investor) Account to another BO (Investor) account, NOT RELATED to Stock Exchange Transactions)

REASON Gift. For Off-Market Sale / Purchase*	COD E 1	1 -	If oplica pleas mar	se		RE	ASON	1		со	DE	If Applic	able
Gift.	1 1	1 -	plica pleas	se		RE	EASON	l		СО	DE	If Applic	abla
												please r	
For Off-Market Sale / Purchase*	2				Refu	nd of so Au	ecuriti thority	•	EPF	1!	5		
	2					Implem t/Regu C			ion	10	0		
Transfer to own account(s)	5				Errone		nsfer F Securi		ing to	1:	1		
Margin to stock broker/ PCM	14				Mee	ting Leg Stoc	gitimat k Brok		s of	12	2		
For Buy-Back	17				Ma	rgin ret brok	urned cer/ PC	-	ck	18	В		
Transfer between Minor Account and Guardian Account	30				Payout	_	yment curities		ınpaid	20	0		
Transfer between specified family members – *please Give relationship	31				ESOF	P/Trans	fer to	emplo	yee	19	9		
Transfer between Partner and Firm or Director and Company	32					Do	nation]		10	6		
Merger/Demerger of Corporate entity	27				For	Open O	ffer A	quisit	ion	13	3		
Dissolution/ Restructuring/Winding up of Partnership firm/Trust	28				Rede	mption	of Mu units	itual F	und	24	4		
Trust to Beneficiaries/On HUF dissolution to Karta & Coparceners	29				Cor (DR) to	underl	eceipt	curiti	-	2!	5		
Transposition	26												

*Required below compulsory additional information for off market transfer for reason "OFF MARKET SALE/PURCHASE or reason like sold, sale,
sell, transfer for cash/money or other similar reason" as per CDSL circular/communiqué No. CDSL/OPS/SYSTM/2018/465 dated on
September 04, 2018

Payment Mode	Bank Account Number	
Bank Name	Branch Name	
Transferee Name	Date Of Issue/Transfer	
Cheque/ Reference Number	Others(If Any)	

	First / Sole Holder	Second Holder	Third Holder
Name			
Signature			