Bank Mandate Form	
We, Mr./ Ms./ Mrs S/reby authorize Allied Bank Limited to send /directly credit cash div low:	
(i) Sharehold	der'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	c 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	

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 Assistant General Manager, CDC Share Registrar Services Limited, CDC House, 99-B, Block-B, S.M.C.H.S, Main Shahrae-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.