

E F U LIFE ASSURANCE LIMITED

Bank Mandate Form For Electronic Credit of Cash Dividend

This is to inform you that in accordance with the Section 242 of the Companies Act, 2017, any dividend payable in cash

Date _____

(i) Shareholder's detail	
Name of shareholder	
Folio No. / CDS Account No.	
CNIC No.	
Passport No. (in case of foreign shareholder)	
Cell number of shareholder	
Landline number of shareholder, if any	
E-mail Address	
ii) Shareholder's bank detail	
Title of Bank Account	
BAN "24 Digits"	
Bank's Name	
Branch Name and Code No.	
Branch Address	

Signature of shareholder

Dear Shareholder,

You are requested to kindly send this Form duly filled in and signed along with legible photocopy of your valid CNIC to your Broker / CDC Participant / CDC Investor Account Service (in case your shareholding is in Book Entry Form) or in case your shareholding is in physical form to our Share Registrar, Central Depository Company of Pakistan Limited, Registrar Services, CDC House, 99-B, Block B, S.M.C.H.S, Main Shahra-e-Faisal, Karachi-74400, Pakistan.