

UMRN Date (tick)⁷ Sponsor Bank Code Y E S B 0 0 0 0 0 0 1 Utility Code Y E S B 0 0 1 7 1 0 0 0 0 0 5 5 0 4CREATE
MODIFY
CANCEL I/We hereby authorize SMC Global Securities Limited to debit (tick)⁶ SB / CA / CC / SB-NRE / SB-NRO / OtherBank Account Number With Bank IFSC or MICR an amount of Rupees (Name of Customers Bank) ₹ 14 FREQUENCY Mthly Qtly H-Yrly Yrly as & when presented 15 DEBIT TYPE Fixed Amount Maximum AmountReference-1 Phone No Reference-2 Email ID

I agree for the debit of mandate processing charges by the bank whom I am authorizing to debit my account as per latest schedule of charges of the bank.

20 PERIOD From To Until Cancelled(11) Signature of the account holder (7) Signature of the account holder (7) Signature of the account holder
Name of the account holder Name of the account holder Name of the account holder

- This is to confirm that the declaration has been carefully read, understood & made by me/us. I am authorizing the User entity/Corporate to debit my account, based on the instructions as agreed and signed by me.
- I have understood that I am authorized to cancel/amend this mandate by appropriately communicating the cancellation/amendment request to the User entity/corporate or the bank where I have authorized debit.

MANDATE INSTRUCTION (Refer Instruction over leaf before filling)

UMRN Date (tick)⁷ Sponsor Bank Code Utility Code CREATE
MODIFY
CANCEL I/We hereby authorize BSE Limited to debit (tick)⁶ SB / CA / CC / SB-NRE / SB-NRO / OtherBank Account Number With Bank IFSC or MICR an amount of Rupees (Name of Customers Bank) ₹ 14 FREQUENCY Mthly Qtly H-Yrly Yrly as & when presented 15 DEBIT TYPE Fixed Amount Maximum AmountReference-1 Phone No Reference-2 Email ID

I agree for the debit of mandate processing charges by the bank whom I am authorizing to debit my account as per latest schedule of charges of the bank.

20 PERIOD From To Until Cancelled(12) Signature of the account holder (8) Signature of the account holder (8) Signature of the account holder
Name of the account holder Name of the account holder Name of the account holder

- This is to confirm that the declaration has been carefully read, understood & made by me/us. I am authorizing the User entity/Corporate to debit my account, based on the instructions as agreed and signed by me.
- I have understood that I am authorized to cancel/amend this mandate by appropriately communicating the cancellation/amendment request to the User entity/corporate or the bank where I have authorized debit.

MANDATE INSTRUCTION (Refer Instruction over leaf before filling)

Instructions to fill Mandate:

- | | |
|---|--|
| 1. UMRN-To be left blank | 12. Amount in words |
| 2. Date in DD/MM/YYYY format | 13. Amount in figures |
| 3. Sponsor Bank IFSC code - YES80000001 - already printed | 14. Frequency at which the debit should happen |
| 4. Utility Code: Unique code of the entity to whom mandate is being given - To be provided by the entity. | 15. Whether the amount is fixed or variable |
| 5. Name of the entity to whom the mandate is being given | 16. Reference-1 : Any details requested by the entity to whom mandate is being given |
| 6. Account type - SB/CA/CC / SB-NRE / SB-NRO / OTHER | 17. Reference - 2 : Any details requested by the entity to whom mandate is being given |
| 7. Tick - Select your appropriate Action | 18. Your phone number |
| a. Create - For New Mandate | 19. Your email id |
| b. Modify - For Changes/Amendment on existing mandate | 20. Period for which the debit mandate is valid |
| c. Cancel - For cancelling the existing registered Mandate | a. Start date |
| 8. Your Bank Account Number for debiting the amount | b. End Date |
| 9. Name of your bank and branch | c. Or until cancelled |
| 10. Your Bank branch IFSC code OR | 21. Signatures of the account holder |
| 11. Your Bank branch MICR code | 22. Name of the account holder |
-

Instructions to fill Mandate:

- | | |
|---|--|
| 1. UMRN-To be left blank | 12. Amount in words |
| 2. Date in DD/MM/YYYY format | 13. Amount in figures |
| 3. Sponsor Bank IFSC code - YES80000001 - already printed | 14. Frequency at which the debit should happen |
| 4. Utility Code: Unique code of the entity to whom mandate is being given - To be provided by the entity. | 15. Whether the amount is fixed or variable |
| 5. Name of the entity to whom the mandate is being given | 16. Reference-1 : Any details requested by the entity to whom mandate is being given |
| 6. Account type - SB/CA/CC / SB-NRE / SB-NRO / OTHER | 17. Reference - 2 : Any details requested by the entity to whom mandate is being given |
| 7. Tick - Select your appropriate Action | 18. Your phone number |
| a. Create - For New Mandate | 19. Your email id |
| b. Modify - For Changes/Amendment on existing mandate | 20. Period for which the debit mandate is valid |
| c. Cancel - For cancelling the existing registered Mandate | a. Start date |
| 8. Your Bank Account Number for debiting the amount | b. End Date |
| 9. Name of your bank and branch | c. Or until cancelled |
| 10. Your Bank branch IFSC code OR | 21. Signatures of the account holder |
| 11. Your Bank branch MICR code | 22. Name of the account holder |
-