



SHAREX DYNAMIC (INDIA) PVT. LTD.

To

Date: _____

Dear Sir,

Use the following Form, as and when required, to help us attend to your queries. Use one form for each Company.

Yours faithfully,
FOR SHAREX DYNAMIC (INDIA) PVT. LTD.
(Please return this Form to undermentioned address)

INWARD NO. : _____

QUERY FORM

To,
Sharex Dynamic (India) Pvt. Ltd.
1, Luthra Ind. Premises
Andheri Kurla Road, Safed Pool,
Andheri (E), Mumbai 400 072.

FROM : _____

_____ PIN- _____

Contact No. : _____

(Mention Name and Complete Address)

Unit _____

Folio No. _____

QUERY (Please (✓) whatever applicable)

(A) NON RECEIPT OF CERTIFICATES SENT FOR :

- TRANSFER
- TRANSMISSION/TRANSPOSITION/AMALGAMATION
- NAME CORRECTION
- CONVERSION / EXCHANGE
- SPLIT/CONSOLIDATION
- SUB-DIVISION / REPLACEMENT
- ENDORSEMENT OF CALL MONEY

PARTICULARS OF SECURITIES INVOLVED :

- 1) **TYPE :** SHARES BEDENTURES
 BONDS
OTHERS : _____
- 2) **REFERENCE FOLIO No.(s) :**
_____ (in case of transfer, please mention transferor's Folio No.(s))
- 3) **NO. OF SECURITIES INVOLVED :**

- 4) **DISTINCTIVE NOS :** _____
- 5) **CERTIFICATE NOS :** _____



PARTICULARS :

(B) NON RECEIPT OF :

<input type="checkbox"/> DIVIDEND WARRANT	1) FOLIO NO (S) : _____
<input type="checkbox"/> INTEREST WARRANT	
<input type="checkbox"/> REFUND ORDER/PAY ORDER	FOR THE PERIOD _____
<input type="checkbox"/> BUYBACK CHEQUE	_____
<input type="checkbox"/> ODD LOT PAYMENT	
<input type="checkbox"/> TAX DEDUCTION CERTIFICATE (FORM 16A)	INTEREST/DIVIDEND DUE DATE :
<input type="checkbox"/> FIXED DEPOSIT RECEIPT NO: _____	_____
<input type="checkbox"/> BONUS SHARES	AMOUNT RS. : _____
<input type="checkbox"/> RIGHT SHARES /DEBS /BONDS	

(C) OTHER QUERIES NOT SPECIFIED IN (A) & (B) ABOVE :

<input type="checkbox"/> LOSS OF SECURITIES / DUPLICATE PROCEDURE	<input type="checkbox"/> CHANGE OF ADDRESS
<input type="checkbox"/> DEMAT DP ID / CLIENT ID	<input type="checkbox"/> DRN NO.
<input type="checkbox"/> CERTIFICATE NOT RECEIVED AFTER REJECTION	

ANY OTHER : _____

ENCLOSURES

REFERENCE OF PREVIOUS CORRESPONDENCE WITH US, IF ANY,

YOUR LETTER(S) TO US		SHAREX REPLY TO YOU		SPECIMEN SIGNATURES
LETTER REF	DATE	LETTER REF	DATE	
_____	_____	_____	_____	1
_____	_____	_____	_____	2
_____	_____	_____	_____	3
_____	_____	_____	_____	4