

## Electronic Credit Mandate Form

Date: \_\_\_\_\_

Registrar: THK Associates (Pvt.) Limited  
Plot No.C-32, Jami Commercial Street-2,  
D.H.A., Phase-VII, Karachi.  
Tel # 021-35310191-93 & 021-35310195 or email at sfc@thk.com.pk

Dear Sir,

Name of Company: AKD Securities Limited  
Electronic credit mandate form (mandatory requirement under Companies Act, 2017)

I hereby communicate to receive my future dividends directly in my bank account as detailed below:

Folio No.	
Name of Shareholder	
CNIC Number	
Contact No.	
Email ID	
International Bank Account Number (IBAN-24 digit) Mandatory	
Bank's Name	
Branch Name/Address	
Mailing Address	

It is stated that the above-mentioned information is correct and that I will intimate the changes in the above- mentioned information to the company and the concerned Share Registrar as soon as these occur.

Regards,

\_\_\_\_\_  
Signature of Shareholder

**Note:** This letter duly filled and signed along with photocopy of Computerized National Identity Card (CNIC) shall be sent to the above-mentioned address.