

OSHADHI SECURITIES LTD.

A CORPORATE MEMBER OF DHAKA STOCK EXCHANGE LTD. & FULL SERVICE DP OF CDBL

Member No. 208

Dhaka Stock Exchange Ltd.
Modhumita Building (6th Floor), Room No. 705
158-160, Motijheel C/A, Dhaka-1000, Bangladesh
Tel : 7169906, 01716-268576

BO Account Nomination Form

Form 23

CDBL Bye Laws

Please complete all details in CAPITAL letters. **Please fill all names correctly.** All communications shall be sent to the correspondence address of only the First Named Account Holder as specified in BO Account Opening Form -02.

Application No

Date (DDMMYYYY)

Name of CDBL Participant (Up to 99 Characters) OSHADHI SECURITIES LTD.	CDBL Participant ID 3 8 0 0 0
Account holder's BO ID 1 2 0 3 8 0 0 0	
Name of Account Holder (Insert full name starting with Title i.e. Mr. / Mrs. / Ms / Dr, abbreviate only if over 30 characters)	

I / We nominate the following person(s) who is / are entitled to receive securities outstanding in my/our account in the event of the death of the sole holder / all the joint holders.

1. Nominee / Heirs Details

Nominee 1 Name in Full	
Short Name of Nominee (Insert full name starting with Title i.e. Mr. / Mrs. / Ms / Dr, abbreviate only if over 30 characters)	Title i.e Mr. / Mrs.
Relationship with A/C Holder	Percentage (%)
Address	
City	Post Code..... State / Division
Country	Telephone
Mobile Phone	Fax
E-mail	
Passport No.	Issue Place
Issue Date	Expiry Date
Residency: Resident <input type="checkbox"/> Non Resident <input type="checkbox"/>	Nationality
Date Of Birth (DDMMYYYY)	
Guardian's Details (if Nominee is a Minor) Name in Full	
Short Name (Insert full name starting with Title i.e. Mr. / Mrs. / Ms / Dr, abbreviate only if over 30 characters)	
Relationship with Norminee	Date of Birth of Minor (DDMMYYYY)
Maturity Date of Minor (DDMMYYYY)	
Address	
City	Post Code..... State / Division
Country	Telephone
Mobile Phone	Fax
E-mail	
Passport No.	Issue Place
Issue Date	Expiry Date
Residency: Resident <input type="checkbox"/> Non Resident <input type="checkbox"/>	Nationality
Date Of Birth (DDMMYYYY)	

Nominee 2
Name in Full

Short Name of Nominee (Insert full name starting with Title i.e. Mr. / Mrs. / Ms / Dr, abbreviate only if over 30 characters)

Title i.e Mr. / Mrs.

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Relationship with A/C Holder Percentage (%)

Address

City Post Code State / Division Country Telephone

Mobile Phone Fax E-mail

Passport No. Issue Place Issue Date Expiry Date

Residency: Resident Non Resident Nationality Date Of Birth (DDMMYYYY)

Guardian's Details (if Nominee is a Minor)

Name in Full

Short Name (Insert full name starting with Title i.e. Mr. / Mrs. / Ms / Dr, abbreviate only if over 30 characters)

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Relationship with Norminee Date Of Birth of Minor (DDMMYYYY) Maturity Date of Minor (DDMMYYYY)

Address

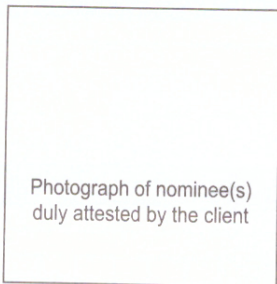
City Post Code State / Division Country Telephone

Mobile Phone Fax E-mail

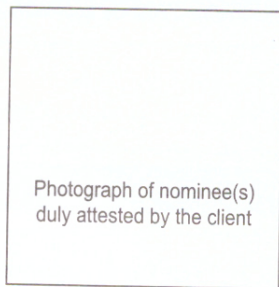
Passport No. Issue Place Issue Date Expiry Date

Residency: Resident Non Resident Nationality Date Of Birth (DDMMYYYY)

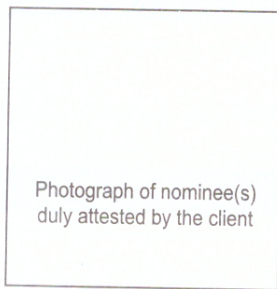
2. Photograph of Nominees / Heirs



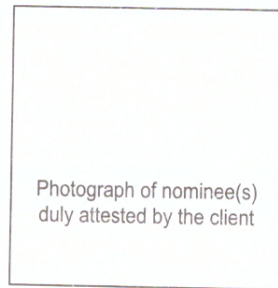
Nominee / Heir 1.



Nominee / Heir 2



Guardian 1



Guardian 2

	Name	Signature
Nominee / Heir 1.		
Guardian 1		
Nominee / Heir 2		
Guardian 2		
First Account Holder		
Second Account Holder		