

## **ANNEXURE FOR DIS SLIP**

For Off-Market Sale/Purchase

Date				
Serial No.				
Source BO NAME				
Source DP ID				
Source Client ID				
Counter BO NAME				
Counter DP ID				
Counter Client ID				
Consideration Amount				
Total Instructions				
Execution Date				
1. Payment Mode	Cheque Payment	Electronic	c Payment	Cash Payment (Mandatory if Consideration Amt captured)
2. Bank Account Number				
3. Bank Name				
4. Branch Name				
5. Transferee Name				
6. Date of Issue / Transfer		_	_	
7. Cheque / Reference Number				
Signature of First Holder	Signature of Second	Holder	Signati	ure of Third Holder
	(For DPs office us	e only)		
Internal Ref No.	Signature Verified By		Transactic	on Entered By

Note: Kindly attach original DIS slip along with this Annexure.