Annexure

Request for addition/deletion of beneficiary account details for execution of off-market transfer

The Cosmos Co-op. Bank Ltd. Cosmos Tower, Plot No 6, ICS Colony, University Road, Ganeshkhind,			Date:		D	D M		M	Y	Y Y		Y
					1		•	1		'		
Shivajinagar, Pune 411007												
DP ID												
Client ID												
Sole/First Holder Name						1	'			1	\ -	
Second Holder Name												
Third Holder Name												
I/We hereby inform you that I/we wish to add/delemarket transfers including inter-depository transfer				ne benef	iciary ac	ccounts	deta	ils be	low for	exec	ution	of off-
		Beneficiary DP ID										
Ac	dd	Beneficiary Client ID										
De	elete	PAN of the First Holder										
Ad	.dd	Beneficiary DP ID										
		Beneficiary Client ID										
De	elete	PAN of the First Holder										
		Beneficiary DP ID										
A	dd	Beneficiary Client ID										
De	elete	PAN of the First Holder										
		2										
1		_ 3										
Signatature of All Holders												
Participant Authorisation Name:												
Signature:		Participant's Stamp & Date										