

Form for Dividend Mandate

Date: _____

To:

Share Registrar – Askari Bank Limited

Share Registrar Department

Central Depository Company of Pakistan Limited

2nd Floor, 307 – Upper Mall,

Opposite Lahore Gymkhana (Near Mian Mir Bridge), Lahore-54000

Tel: (92-42) 35789378-87, 35789367 (Dir.)

Fax: (92-42) 35789340

Email: info@cdcpak.com

Dear Sir,

I Mr./Mrs./Ms. _____ S/O,W/O,D/O _____

hereby authorize **Askari Bank Limited** to directly credit cash dividend declared by it, if any, in the below mentioned bank account:

(i) Shareholder's Detail	
Name of the shareholder	
Folio No. /CDC Participant ID A/c No.	
CNIC No. *	
Passport No. (in case of foreign shareholder) **	
Land Line Phone Number	
Cell Number	
Email Address	

(ii) Shareholder's Bank Detail	
Title of the Bank Account	
Bank Account Number	
International Banking Account Number (IBAN)	
Bank's Name	
Branch Name	
Branch Code	
Branch Address	

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

Signature of the Shareholder

Note:

1. Under the provisions of Section 250 of the Companies Ordinance 1984 and pursuant of directions given by SECP vide circular No.18 dated June 05, 2012, shareholders may if so desire can direct for paying the cash dividend through their bank account by providing the dividend mandate form.
2. Please note that this dividend mandate is optional and not compulsory. In case you do not wish your dividend to be directly credited into your bank account then the same shall be paid to you through the dividend warrants.

* Please attach photocopy of the CNIC.

** Please attach photocopy of the passport