

TRANSMISSION REQUEST FORM (In case of death of the sole holder)

Appl	ication No.					Т	Date												
(Please fill all the details in Block Letters in English)																			
To, Kosamattam Finance Ltd Kosamattam City centre Kottayam - 686001																			
Dear Sir / Madam, I/we, Nominee(s) / Successor/ Guardian of the successor or nominee(s) (in case *the claimant is a Minor- Date of Birth of the minor*) Relationship with the minor request you to transmit the following securities due to the death of the sole account holder. Original Death Certificate / copy of Death Certificate (duly notarized / attested										lue									
under seal by a Gazetted Officer) is attached herewith.																			
*Please attach relevant proof																			
Name of the deceased BO: Account Number of the deceased BO:																			
	DP ID 1 3 0 7 9 Date of the Deceased Sole Holder			2 0 0 0			Clie	Client ID											
Kindly transmit all securities in the deceased BO's account mentioned above to the BO account mentioned below.																			
Details of the Successor (s)																			
of the			/ Legal to the Estate eceased / of the Estate									G	Client ID						
Detai	ils of Tran	emission																	
Sr. No	or. Name of the Securit		ISIN				Quantity of securi to be transmitted								ercentage				
		cure duly signed b		s)/ S	ucce	esso	r / G	uaro	lian	of t	he s	ucce	ssor	or no	mine	e(s) (in ca	se of	
Minor), if the spa	xure duly signed bace above is insuffi	cient.								he s	ucce	ssor	or no	minee	e(s) (in ca	se of	

	Nominee(1) Successor/Guardian of successor/Nominee	Nominee(2) Successor/Guardian of successor/Nominee	Nominee(3) Successor/Guardian of successor/Nominee
Name			
Signature			