CDC SHARE REGISTRAR SERVICES LIMITED
SHAREHOLDER INFORMATION FORM

Company Name_____

Personal Information

Folio # (Only applicable for existing shareholder)			
Name (As per CNIC)			
Father's / Husband's Name (As per CNIC)			
CNIC #			
Address			
City		Country	
Telephone #		Cell #	
Email Address			
Zakat Status (Please tick any one)	Muslim Zakat Payable ☐ *Non-Muslim Zakat Non Payable ☐	*Muslim Zakat Non Payable ☐	

** If opted Zakat Non Payable, please provide CZ–50 (applicable for Muslims) or Solemn Affirmation (applicable for Non-Muslims).*

International Bank Account Number (IBAN) & Bank Details (For credit of cash dividend)

IBAN	P K
Bank Name	
Branch Name	
Branch Address & City.	

Note: Please ensure providing correct IBAN and its title must be on your name. In case of any error or omission in the given IBAN, CDCSR shall not be held responsible in any manner for any loss or delay in cash dividend.

It is also stated that all the information provided above is correct, accordingly, please update the same against my above mentioned folio.

_____
Signature
Date: _____

Encl: Photocopy of CNIC