

REPURCHASE / REDEMPTION REQUEST FORM**MaxGrowth capital Private Limited [DPID: 12066200]****15 BSF Colony Market ,Opp. H.M.V College, G.T Road Jalandhar –144008**

RFN		Date																		
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I / We offer the below mentioned securities for repurchase / redemption and declare that my / our account be debited the number of securities to the extent of my / our repurchase / redemption request and proceeds be paid to me / us through cheque / bank draft. I / We hereby declare that the below mentioned person(s) are the beneficial owners of the security mentioned.

Account No.	1	2	0	6	6	2	0	0												
Account Holder Name																				
No. of Securities to be Repurchased / Redeemed (in figure)																				
In words (integers)																				
And (Fractions)																				
Name of the Security																				
Name of the Issuing Company																				
Face Value																				
ISIN																				

Specimen Signature(s)	Name	Signature
First / Sole Holder		
Second Holder		
Third Holder		

Participant Authorization

Received the above mentioned securities for repurchase / redemption from:

Account No.	1	2	0	6	6	2	0	0												
ISIN																				
Date																				
Name of the First Holder																				

The application form is verified with the details of the beneficial owner's account and certified that the application form is in order. The account has sufficient balance to accept the repurchase / redemption request. It is also certified that the beneficial owner's signatures are verified and found in order.

The other details of the beneficial owners are extracted from the records are enclosed.

Forwarded by – Name :

Signature:

Seal

===== (Please Tear Here) =====

Acknowledgement

MaxGrowth Capital Private Limited [DPID: 12066200], 15, B.S.F Colony Market, Opp. H.M.V College, G.T Road, Jalandhar –144008

We hereby acknowledge the receipt of repurchase / redemption request for _____ no. of securities of _____ (Security details) from _____ (Name) holding a/c. no. _____.

Depository Participant's Signature

Seal

Date