

**ANNEXURE - OA
TRANSPOSITION FORM**
(for transposition and demat cases)

Date :

To :

DP ID : 300966

GLOBE CAPITAL MARKET LIMITED

804, Ansal Bhawan, 16 K.G. Marg, Connaught Place, New Delhi-110 001
Phones : 30412400, 23316916-920, 23720887 / 888
Fax : 011-23720880, 23712630

We the undersigned, being the joint holders of securities of _____
Wish to have our holdings transposed in the following order in which we have an account with you,
We are also submitting the certificate(s) with DRF for dematerialization.

NAMES ON THE CERTIFICATES OF SECURITY :

	NAMES OF SHARE HOLDERS	SIGNATURE
FIRST HOLDER		
SECOND HOLDER		
THIRD HOLDER		

DETAILS OF OUR CLIENT ACCOUNT

DP ID	CLIENT ID		NAMES OF ACCOUNT HOLDERS
IN 300966		FIRST HOLDER	
		SECOND HOLDER	
		THIRD HOLDER	

Note : Separate Transposition Form should be filled by the joint holders for securities having distinct SI. No.

For **GLOBE CAPITAL MARKET LIMITED**

(Authorised Signatory)