CENTRAL KYC REGIST	RY   Know Your Customer (KYC) Application Form   Legal Entity / Other than Individuals
Important Instructions: A) Fields marked with " are B) Tick '√' wherever applic C) Please fill the date in DE D) Please fill the form in En E) KYC number or applican	mandatory fields.       F)       List of State / U.T. Code as per Indian Motor Vehicle Act, 1988 is available at the end.         cable.       G)       List of of two character ISO 3166 country codes is available at the end.         D-MM-YYYY format.       H)       Please read section wise detailed guidelines / instruction at the end.
For office use only	Application Type* 🗌 New 🔲 Update
(To be filled by financial ins	titution) KYC Number (Mandatory for KYC update request)
	* (Please refer instruction A at the end)
□ Name*	
Entity Constitution Type*	Others (Specify) (Please refer instruction B at the end)
Date of Incorporation / Fo	Image: mation*         D         -         M         -         Y         Y         Y           Date of Commencement of Business         D         -         M         -         Y         Y         Y
Place of Incorporation / F	ormation* Country of Incorporation / Formation* TIN or Equivalent Issuing Country
PAN*	Form 60 furnished
TIN/ GST Registration Nu	mber
2. PROOF OF IDENTIT	Y (Pol)* (Please refer instruction <b>B</b> at the end)
	t(s) in respect of person authorised to transact
Certificate of Incorporat	
Memorandum and Artic	
Resolution of Board / M	
	ole Proprietorship Only) Activity Proof - 2 (For Sole Proprietorship Only)
3. ADDRESS* (Please	e see instruction <b>C</b> at the end)
,	ddress / Place of Business*
Proof of Address*	Certificate of Incorporation / Formation
Line 1*	
Line 2	
Line 3	City / Town / Village*
District*	PIN / Post Code*         State / U.T.         Country
3.2 Local Address in Indi	a (If different from Above)*
Line 1*	
Line 2	
Line 3	City / Town / Village*
District*	PIN / Post Code*         State / U.T         Country
4. CONTACT DETAILS	S (All communications will be sent to Mobile number/Email.ID provided" may be used) (Please refer instruction <b>D</b> at the end)
Tel. (Off)	- FAX FAX
Mobile	Email ID     Email ID
Mobile	Email ID Email ID

6. REMARKS (If any)						
7. APPLICANT DECLARATION (Please refe Instruction G at the end)						
I hereby declare that the details furnished above are true and correct to the best of my knowledge and belief and I undertake to inform you of any changes therein, immediately. Incase any of the above information is found to be false or untrue or misleading or misrepresenting, I am aware that I may be held liable for it. I/we hereby consent to receiving information from Central KYC Registry through SMS/Email on the above registered number/email address I hereby give an explicit consent to download records from CKYCR.						
Date :         D         -         Y         Y         Place:	Signature / Thumb Impression of Authorised Person(s)					
7. ATTESTATION / FOR OFFICE USE ONLY						
Documents Received Certified Copies Equivalent e-document						
KYC VERIFICATION CARRIED OUT BY INSTITUTION DETAILS						
dentity Verification Done Date D - M - Y Y Y A Name : MSB E-TRADE SECURITIES LIMITED						
Emp. Name	Code : IN0534					
Emp. Code						
Emp. Designation						
Emp. Branch (Employee Signature)						

Ann	exure A   Legal Entity / Othe	er than Individuals / Related	d Person	
CE	NTRAL KYC REG	ISTRY   Know You	ur Customer (KYC) Application Form   Related Person	
<ul><li>A) Field</li><li>B) Tick</li><li>C) Pleas</li><li>D) Pleas</li></ul>	nt Instructions: Is marked with " are mand '\range' wherever applicable. se fill the date in DD-MM- se fill the form in English a number or applicant is m	YYYY format. and in BLOCK letters.	<ul> <li>F) List of State / U.T. Code as per Indian Motor Vehicle Act, 1988 is available at the end.</li> <li>G) List of of two character ISO 3166 country codes is available at the end.</li> <li>H) Please read section wise detailed guidelines / instruction at the end.</li> <li>I) For particular section update, please tick (✓) in the box available before the Section number and strike off the sections not required to be updated.</li> </ul>	
(To be f	ce use only filled by financial insti	itution) KYC N		and delete request)
_		,	ase refer instruction E at the end)	lata d Danaan Dataila
	Addition of Related Pe C Number of Related			lated Person Details
	ated Person Type*	Director P	Promoter Karta Trustee Partner Court Appointment Official Propriet Authorised Signatory Beneficial Owner Power of Attorney Holder	2
DIN	I (Director Identificati	on Number)	(Mandatory if Related Person Type is Director)	
Ple	ase tick if applicable		sed Person (PEP)	
1.1 PEr	RSONAL DETAILS (	Prefix		_ast Name
Main Fath Mot Date Ger	ne* (Same as ID proc den Name ner / Spouse Name her Name e of Birth* nder* ionality*		Image: Strategy of the strategy	
1 2 DD(			lease refer instruction E at the end)	
1.2 1 1.				
I. Ce	ertified copy of OVD or eq		OVD or OVD obtained through digital KYC process needs to be submitted (anyone of the following OVDs)	
I. Ce		uivalent e-document of (	,	
	A- Passport Numbe	uivalent e-document of (	,	РНОТО*
	A- Passport Numbe B-Voter ID Card	uivalent e-document of (	,	□ РНОТО*
	A- Passport Numbe B-Voter ID Card C-Driving Licence	r	,	
	<ul> <li>A- Passport Numbe</li> <li>B-Voter ID Card</li> <li>C-Driving Licence</li> <li>D-NREGA Job Card</li> </ul>	uivalent e-document of (           Image: state	,	
	<ul> <li>A- Passport Numbe</li> <li>B-Voter ID Card</li> <li>C-Driving Licence</li> <li>D-NREGA Job Card</li> <li>E- National Population</li> </ul>	uivalent e-document of 0 r	,	PHOTO*
	<ul> <li>A- Passport Numbe</li> <li>B-Voter ID Card</li> <li>C-Driving Licence</li> <li>D-NREGA Job Card</li> <li>E- National Populati</li> <li>F- Proof of Possess</li> </ul>	uivalent e-document of ( r	,	
	A- Passport Numbe B-Voter ID Card C-Driving Licence D-NREGA Job Card E- National Populati F- Proof of Possess E-KYC Authentication	uivalent e-document of ( r	,	
	A- Passport Numbe B-Voter ID Card C-Driving Licence D-NREGA Job Card E- National Populati F- Proof of Possess E-KYC Authenticatio Offline verification o	uivalent e-document of ( r	OVD or OVD obtained through digital KYC process needs to be submitted (anyone of the following OVDs)         Image: Control of the following OVDs         Image: Control of the following OV	
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II C Line Line Line Line III C III C	A- Passport Number B-Voter ID Card C-Driving Licence D-NREGA Job Card E- National Populati F- Proof of Possess E-KYC Authentication Offline verification on 1* 3 CURRENT ADD Same as above mentione Certified copy of OVD or A- Passport Number B-Voter ID Card C- Driving Licence D-NREGA Job Card E- National Population	uivalent e-document of ( r	OVD or OVD obtained through digital KYC process needs to be submitted (anyone of the following OVDs)	
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			/	

Line 1 <sup>*</sup> Line 2 Line 2 Line 2 Line 2 Line 3 District Pin / Post Code* City / Town / Village* Country .  1.4 CONTACT DETAILS (All communication will be sent on provided mobile no /Email-ID) (Please refer instruction D at the and) Tel. (Off) Tel. (Off) City / Tel. (Res) City / Town / Village* Country .  1.4 CONTACT DETAILS (All communication will be sent on provided mobile no /Email-ID) (Please refer instruction D at the and) Tel. (Off) City / Town / Village* Country .  1.4 CONTACT DETAILS (All communication will be sent on provided mobile no /Email-ID) City / Town / Village* Country .  1.4 CONTACT DETAILS (If ANY)  2. APPLICANT DECLARATION .  1. hereby declare that the details furnished above are true and correct to the best of my knowledge and belief and I undertake to infom you of any changes therein, immediately incase any of the above information is found to be false or untrue or misleading or miscrepresenting. Lam ware that I may be hed liable for at. Uwe hereby consent to receiving information from Central KYC Registry through SMS/Email on the above registered numberedenail address I hereby give an explicit consent to download records from CKYCR. Date: Date: Date: Date: Place: Place	'ino 1*	
Line 3 District <sup>1</sup> Pin / Post Code <sup>*</sup> State / U.T. Country  1.4 CONTACT DETAILS (All communication will be sent on provided mobile no./Email-ID) (Please refer instruction D at the end) Tel. (Of) Tel. (Of) Tel. (Res)		
District*       Pin / Post Code*       State / U.T.       Country         1.4 CONTACT DETAILS (All communication will be sent on provided mobile no./Email-ID) (Please refer instruction D at the end)         Tel. (Off)       Tel. (Res)       One control to the end of t	Line 2	
1.4 CONTACT DETAILS (All communication will be sent on provided mobile no ./Email-ID) (Please refer instruction D at the end)         Tel. (Off)       Tel. (Res)         Email ID       Tel. (Res)         REMARKS (IF ANY)         2. APPLICANT DECLARATION         I hereby declare that the details furnished above are true and correct to the best of my knowledge and belief and I undertake to inform you of any changes therein, immediately, Incase any of the above information is found to be false or untrue or misleading or misrepresenting. I an aware that I may be held lable for it.         I hereby consent to receiving information from Central KYC Registry through SMS/Email on the above registered number/email address         I hereby give an explicit consent to download records from CKYCR.         Date :       Place:         I hereby verification       Digital KYC Process         Equivalent e-document       Video Basrd KYC         KYC VERIFICATION CARRIED OUT BY       INSTITUTION DETAILS         Identity Verification       Done       Date       Place         Emp. Dasignation       Imp. Branch       Imp. Branch       Imp. Branch         Imp. Branch       Imp. Branch       Imp. Branch       Imp. Branch	Line 3	City / Town / Village*
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Tel. (Off)	1. 4 CONTACT DETAILS (All communication will be sent on provided mot	ile no /Email-ID) (Please refer instruction <b>D</b> at the end)
Email ID       Image: Ima		
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misleading or misrepresenting, I am aware that I may be held liable for it.       (Signature / Thumb Impression)         I/we hereby consent to receiving information from Central KYC Registry through SMS/Email on the above       (Signature / Thumb Impression)         registered number/email address       Signature / Thumb Impression of Applicant <b>3. ATTESTATION / FOR OFFICE USE ONLY</b> Signature / Thumb Impression of Applicant         Documents Received       Certified Copies       E-KYC data received from UIDAI       Data received from Offline verification       Digital KYC Process         KYC VERIFICATION CARRIED OUT BY       INSTITUTION DETAILS         Identity Verification       Done       Date       Image: Code       Image: Code       Image: Code       Name : MSB E-TRADE SECURITIES LIMITED         Emp. Name       Code       IN0534       Imoge: Code	I hereby declare that the details furnished above are true and correct to the best of	f my knowledge and belief and I undertake
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Emp. Name       Code	KYC VERIFICATION CARRIED OUT BY	INSTITUTION DETAILS
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(Employee Signature)	Emp. Code	Hade Section
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	Emp. Code     Implementation       Emp. Designation     Implementation       Emp. Branch     Implementation	Delhi )
	Emp. Code     Implementation       Emp. Designation     Implementation       Emp. Branch     Implementation	Delhi )

Annexure A2   Legal Entity / Other than Individuals										
CENTRAL KYC REGISTRY   Know You	ur Customer (KYC) A	Application For	m   Related Pe	rson						
Important Instructions:       A)       Fields marked with " are mandatory fields.         B)       Tick '\$' wherever applicable.       F)         List of State / U.T. Code as per Indian Motor Vehicle Act, 1988 is available at the end.         B)       Tick '\$' wherever applicable.         C)       Please fill the date in DD-MM-YYYY format.         D)       Please fill the form in English and in BLOCK letters.         E)       KYC number or applicant is mandatory for update application.										
	ication Type*	lew Dpdate		) (Mar	ndatory for	KYC upo	<i>late</i> and	delete ı	reque	st)
1. DETAILS OF RELATED PERSON* (P	lease refer instruction E	at the end) Deletion of Rela	ated Person			Update F	Related F	erson l	Details	5
KYC Number of Related Person (if availab	le*)		If KYC number	is available, or	nly 'Related F	Person Type	e' & 'Name	is mand	atory	
	Promoter CKarta			Appointmen r of Attorney		□ Propri □ Other		snecify	)	
DIN (Director Identification Number)			latory if Related F				(1 10000	opeeny	/	
			-		,					
Please tick if applicable	. ,	□ Related to Po	litically Exposed	Person (RPE	P) 🗆 N	NO				
1.1 PERSONAL DETAILS (Please refer ins			N.C. 1.11				1			
Prefix Name* (Same as ID proof)	First Name		Middle	Name			Last Na	ame		
Maiden Name										
Father / Spouse Name										
Mother Name									_	
Date of Birth*										
Gender*	F- Female	T-Transgender								
Nationality*	Others (ISO 316	-	□□)							
PAN			Form 60 furr	ished						
1.2 PROOF OF IDENTITY AND ADDRESS	* (Please refer instruction	on <b>E</b> at the end)								
1.2 PROOF OF IDENTITY AND ADDRESS* (Please refer instruction E at the end)     1. Certified copy of OVD or equivalent e-document of OVD or OVD obtained through digital KYC process needs to be submitted (anyone of the following OVDs)										
I. Certified copy of OVD or equivalent e-document			cess needs to be su	omitted (anyone	e of the follow	ving OVDs)				
I. Certified copy of OVD or equivalent e-document  A- Passport Number			cess needs to be su	omitted (anyone	e of the follow	ving OVDs)		ВЦ	<b>NTO</b> *	
			ocess needs to be su	bmitted (anyone	e of the follow	ving OVDs)		РНС	OTO*	
A- Passport Number			cess needs to be su	omitted (anyone	e of the follow	ving OVDs)		РНС	ото*	
A- Passport Number			icess needs to be su	omitted (anyone	e of the follow	ving OVDs)				
A- Passport Number			icess needs to be su		e of the follow	ving OVDs)				085
A- Passport Number			icess needs to be su		e of the follow	ving OVDs)				085
A- Passport Number			icess needs to be su	omitted (anyone	e of the follov	ving OVDs)				0\$\$
<ul> <li>A- Passport Number</li> <li>B-Voter ID Card</li> <li>C-Driving Licence</li> <li>D-NREGA Job Card</li> <li>E- National Population Register Letter</li> <li>F- Proof of Possession of Aadhaar</li> </ul>			icess needs to be su	omitted (anyone	e of the follow	ving OVDs)				085
A- Passport Number         B-Voter ID Card         C-Driving Licence         D-NREGA Job Card         E- National Population Register Letter         F- Proof of Possession of Aadhaar         II         E-KYC Authentication         III         Offline verification of Aadhaar			icess needs to be su		e of the follow	ving OVDs)				0\$\$
A- Passport Number     B-Voter ID Card     C-Driving Licence     D-NREGA Job Card     E- National Population Register Letter     F- Proof of Possession of Aadhaar     E-KYC Authentication     III Offline verification of Aadhaar     Line 1*			Image: construction of the second state		e of the follow	ving OVDs)				0\$5
A- Passport Number			Image: second							0\$\$
A- Passport Number     B-Voter ID Card     C-Driving Licence     D-NREGA Job Card     E- National Population Register Letter     F- Proof of Possession of Aadhaar     E-KYC Authentication     III Offline verification of Aadhaar     Line 1*					own / Village		Sig			0\$\$
A- Passport Number         B-Voter ID Card         C-Driving Licence         D-NREGA Job Card         E- National Population Register Letter         F- Proof of Possession of Aadhaar         II         Cffline verification of Aadhaar         Line 1*         Line 2         Line 3         District*	of OVD or OVD obtained thr				own / Village					0\$5
<ul> <li>A- Passport Number</li> <li>B-Voter ID Card</li> <li>C-Driving Licence</li> <li>D-NREGA Job Card</li> <li>E- National Population Register Letter</li> <li>F- Proof of Possession of Aadhaar</li> <li>II</li> <li>E-KYC Authentication</li> <li>III</li> <li>Offline verification of Aadhaar</li> <li>Line 1*</li> <li>Line 2</li> <li>Line 3</li> <li>District*</li> <li>1.3. CURRENT ADDRESS DETAILS</li> </ul>	of OVD or OVD obtained thr	n <b>B</b> at the end)	State / U.T.		own / Village		Sig			0\$5
<ul> <li>A- Passport Number</li> <li>B-Voter ID Card</li> <li>C-Driving Licence</li> <li>D-NREGA Job Card</li> <li>E- National Population Register Letter</li> <li>F- Proof of Possession of Aadhaar</li> <li>II</li> <li>E-KYC Authentication</li> <li>III</li> <li>Offline verification of Aadhaar</li> <li>Line 1*</li> <li>Line 2</li> <li>Line 3</li> <li>District*</li> <li>I.3. CURRENT ADDRESS DETAILS</li> <li>Same as above mentioned address (In sch ca</li> </ul>	of OVD or OVD obtained thr	n B at the end)	<pre>     State / U.T.     ed) </pre>		Dwn / Village	•	Sig 			0\$5
<ul> <li>A- Passport Number</li> <li>B-Voter ID Card</li> <li>C-Driving Licence</li> <li>D-NREGA Job Card</li> <li>E- National Population Register Letter</li> <li>F- Proof of Possession of Aadhaar</li> <li>II</li> <li>E-KYC Authentication</li> <li>III</li> <li>Offline verification of Aadhaar</li> <li>Line 1*</li> <li>Line 2</li> <li>Line 3</li> <li>District*</li> <li>I.3. CURRENT ADDRESS DETAILS</li> <li>Same as above mentioned address (In sch ca I. Certified copy of OVD or equivalent e-document</li> </ul>	of OVD or OVD obtained thr	n B at the end)	<pre>     State / U.T.     ed) </pre>		Dwn / Village	•	Sig 			0\$\$
A- Passport Number   B-Voter ID Card   D-NREGA Job Card   D-NREGA Job Card   E- National Population Register Letter   F- Proof of Possession of Aadhaar   II   E-KYC Authentication   III   Offline verification of Aadhaar   Line 1*   Line 2   Date:   District*     Same as above mentioned address (In sch car)   Certified copy of OVD or equivalent e-document	of OVD or OVD obtained thr	n B at the end)	<pre>     State / U.T.     ed) </pre>		Dwn / Village	•	Sig 			085
A- Passport Number   B-Voter ID Card   D-NREGA Job Card   D-NREGA Job Card   E- National Population Register Letter   F- Proof of Possession of Aadhaar   II   E-KYC Authentication   III   Offline verification of Aadhaar   Line 1*   Line 2   District*     Interface   Same as above mentioned address (In sch ca   Certified copy of OVD or equivalent e-documer   A- Passport Number   B-Voter ID Card	of OVD or OVD obtained thr	n B at the end)	<pre>     State / U.T.     ed) </pre>		Dwn / Village	•	Sig 			0\$5
A- Passport Number   B-Voter ID Card   D-NREGA Job Card   D-NREGA Job Card   E- National Population Register Letter   F- Proof of Possession of Aadhaar   II   E-KYC Authentication   III   Offline verification of Aadhaar   Line 1*   Line 2   District*     Istrict*     Same as above mentioned address (In sch ca   I. Certified copy of OVD or equivalent e-documer   A- Passport Number   B-Voter ID Card   C-Driving Licence	of OVD or OVD obtained thr	n B at the end)	<pre>     State / U.T.     ed) </pre>		Dwn / Village	•	Sig 			0\$\$
A- Passport Number   B-Voter ID Card   D-NREGA Job Card   D-NREGA Job Card   E- National Population Register Letter   F- Proof of Possession of Aadhaar   II   E-KYC Authentication   III   Offline verification of Aadhaar   Line 1*   Line 2   District*     Interficient above mentioned address (In sch card)   Certified copy of OVD or equivalent e-document   A- Passport Number   B-Voter ID Card   D-NREGA Job Card	of OVD or OVD obtained thr	n B at the end)	<pre>     State / U.T.     ed) </pre>		Dwn / Village	•	Sig 			OSS
A- Passport Number   B-Voter ID Card   D-NREGA Job Card   D-NREGA Job Card   E- National Population Register Letter   F- Proof of Possession of Aadhaar   II   E-KYC Authentication   III   Offline verification of Aadhaar   Line 1*   Line 2   District*     Same as above mentioned address (In sch ca   I. Certified copy of OVD or equivalent e-documer   A- Passport Number   B-Voter ID Card   D-NREGA Job Card   D-NREGA Job Card	of OVD or OVD obtained thr	n B at the end)	<pre>     State / U.T.     ed) </pre>		Dwn / Village	•	Sig 			
A- Passport Number   B-Voter ID Card   D-NREGA Job Card   E- National Population Register Letter   F- Proof of Possession of Aadhaar   II   E-KYC Authentication   III   Offline verification of Aadhaar   Line 1*   Line 2   District*   Same as above mentioned address (In sch ca   I. Certified copy of OVD or equivalent e-documer   A- Passport Number   B-Voter ID Card   D-NREGA Job Card   D-NREGA Job Card   D-NREGA Job Card   Line 1*   Line 2   Line 3   District*	of OVD or OVD obtained thr	n B at the end)	<pre>     State / U.T.     ed) </pre>		Dwn / Village	•	Sig 			0\$\$
A- Passport Number   B-Voter ID Card   D-NREGA Job Card   D-NREGA Job Card   E- National Population Register Letter   F- Proof of Possession of Aadhaar   II   Cfline verification of Aadhaar   Line 1*   Line 2   Date:   District*     Same as above mentioned address (In sch ca   I. Certified copy of OVD or equivalent e-document   A- Passport Number   B-Voter ID Card   D-NREGA Job Card   E- National Population Register Letter   F - Proof of Possession of Aadhaar	of OVD or OVD obtained thr	n B at the end)	<pre>     State / U.T.     ed) </pre>		Dwn / Village	•	Sig 			0\$\$
A- Passport Number   B-Voter ID Card   D-NREGA Job Card   E- National Population Register Letter   F- Proof of Possession of Aadhaar   II   E-KYC Authentication   III   Offline verification of Aadhaar   Line 1*   Line 2   District*   Same as above mentioned address (In sch ca   I. Certified copy of OVD or equivalent e-documer   A- Passport Number   B-Voter ID Card   D-NREGA Job Card   D-NREGA Job Card   D-NREGA Job Card   Line 1*   Line 2   Line 3   District*	of OVD or OVD obtained thr	n B at the end)	<pre>     State / U.T.     ed) </pre>		Dwn / Village	•	Sig 			0\$\$

v 🗆	Self Declaration
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Address						
Line 1*						
Line 2						
Line 3		City / Town / Village*				
Districl*	Pin / Post Code*	State / U.T Country				
1. 4 CONTACT DETA	AILS (All communication will be sent on provided mobile n	o./Email-ID) (Please refer instruction <b>D</b> at the end)				
Tel. (Off)         Tel. (Res)         —         Mobile         —         —						
Email ID						
2. APPLICANT DEC	LARATION					
to inform you of an misleading or misre I/we hereby conser registered number/	I hereby declare that the details furnished above are true and correct to the best of my knowledge and belief and I undertake to inform you of any changes therein, immediately. Incase any of the above information is found to be false or untrue or misleading or misrepresenting, I am aware that I may be held liable for it.     I/we hereby consent to receiving information from Central KYC Registry through SMS/Email on the above registered number/email address     I hereby give an explicit consent to download records from CKYCR. Date : D D - M M - Y Y Y Y Place: Signature / Thumb Impression of Applicant					
3. ATTESTATION / FO	R OFFICE USE ONLY					
Documents Received	Documents Received       Certified Copies       E-KYC data received from UIDAI       Data received from Offline verification       Digital KYC Process         Equivalent e-document       Video Basrd KYC					
KYC	VERIFICATION CARRIED OUT BY	INSTITUTION DETAILS				
Identity Verification	Done Date $D$ $D$ $ M$ $M$ $ Y$ $Y$ $Y$	Name : MSB E-TRADE SECURITIES LIMITED				
Emp. Name Code : IN0534						
Emp. Code						
Emp. Designation		de Sec				
Emp. Branch						
(Employee Signature)						