

**ANNEXURE O  
TRANSMISSION FORM**

**To  
MLB SECURITIES LTD  
13 MAHENDRA ROAD  
1<sup>ST</sup> FLOOR, KOLKATA-700025  
DP ID: IN302654**

**Date:** \_\_\_\_\_

I/We, the undersigned, being the

- |                                |                          |                 |                          |
|--------------------------------|--------------------------|-----------------|--------------------------|
| Executor(s) of the Will        | <input type="checkbox"/> | Legal heir(s)   | <input type="checkbox"/> |
| Administrator(s) of the Estate | <input type="checkbox"/> | Joint holder(s) | <input type="checkbox"/> |
| Successor(s) to the Estate     | <input type="checkbox"/> | Nominee         | <input type="checkbox"/> |
| Survivors of HUF               | <input type="checkbox"/> |                 |                          |

Of Mr. /Mrs. /Ms. \_\_\_\_\_, the deceased, of which \*nomination/Probate/letter of administration/succession certificate was duly granted to me/us on the \_\_\_\_\_ Day of \_\_\_\_\_ of \_\_\_\_\_ hereby request you to register me/us as the beneficial owner(s) in respect of the securities standing in the name of the said deceased under Client Id \_\_\_\_\_ DP Id \_\_\_\_\_, the details of which are as follows:

ISIN	Name of Company	No of Securities

I/We give hereunder the details of my/our account with a Participant to which the security balances are requested to be transmitted:

DP ID	CLIENT ID	CLIENT NAME

I/We hereby submit the following documents to support my claim for the said securities.

- |                          |                          |                             |                          |
|--------------------------|--------------------------|-----------------------------|--------------------------|
| Death certificate        | <input type="checkbox"/> | Indemnity                   | <input type="checkbox"/> |
| Succession certificate   | <input type="checkbox"/> | Affidavit                   | <input type="checkbox"/> |
| Probate of the Will      | <input type="checkbox"/> | Letter of surety            | <input type="checkbox"/> |
| Letter of Administration | <input type="checkbox"/> | No objection certificate(s) | <input type="checkbox"/> |
| Court Decree             | <input type="checkbox"/> | Deed of Partition           | <input type="checkbox"/> |

Sl No	Name	Signature

**Note:**

- This request form should be signed by the surviving joint holder(s)/legal heir(s)/legal Representative/nominee/all surviving members of the HUF, as the case may be.
- \*Strike off whichever is not applicable.

**LIST OF SECURITIES TO BE TRANSMITTED:**

<b>SL NO</b>	<b>ISIN</b>	<b>NAME OF COMPANY</b>	<b>NO OF SECURITIES</b>
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			
19			
20			
21			
22			
23			
24			
25			