

OFF MARKET SALE PAYMENT DETAILS ANNEXURE

DEBIT BO ID	CREDIT BO ID

DIS Slip No:

Date :

ISIN	QUANTITY	Consideration Amount

Payment Mode	
Bank Account No	
Bank Name	
Branch Name	
Transfree Name	
Date of Issue/Transfer	
Cheque/ Reference Number	

1st Holder Signature

2nd Holder Signature

3rd Holder Signature