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ROYAL SECURITIES EXCHANGE OF BHUTAN LIMITED

FORM 10

TRANSMISSION REQUEST FORM

Please fill in all the details in CAPITAL letters.

Date DD MM YEA R

Table with 3 columns: SI.No, Name of Company/Security, Quantity to be transferred In figures (Quantity)

Transferor Details

Name of Account Holder

Citizen Identity Card No.

Central Depository Code No.

Grid boxes for Citizen Identity Card No. and Central Depository Code No.

Transferee Details

Name of Account Holder

Citizen Identity Card No.

Central Depository Code No.

Grid boxes for Citizen Identity Card No. and Central Depository Code No.

Present Address

Contact No.

Grid box for Contact No.

Bank Details for dividend mandate (mandatory)

Saving Account No.

Grid box for Saving Account No.

Bank Name & Address

Reason for Transmission

Legal Stamp

Signature of Account Holder

CD Participation Certificate

The transmission request form has been verified with the details of the Account Holder and it is certified that it is in order. The proposed transmission has the appropriate approval of the Authority as required.

Securities standing to the credit of a Transferor shall vest in his/her nominee/s and where no nomination was made, succession to such securities has been determined in accordance with law in favour of the heirs or legal representatives of the deceased against production of the necessary representation to the estate of the deceased by way of probate, letters of administration or succession certificate, as applicable.

Signature