

Shriram Financial Services Private Limited
 RUKMINI TOWERS, 3rd and 4th Floor,# 3/1, Platform Road
 Sheshadripuram,Bangalore - 560 020 Tel No: (080) 22496869 Fax : (080) 2249 6999
 Website: <https://www.shriramfs.com> **(DP ID-IN303077/12062900/12031500)**

TRANSPPOSITION FORM

Date: _____

We, the undersigned, being the joint holder(s) of securities of _____ (Name of the Company) 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) along with DRF for dematerialisation.

Names as per the certificate of security:

Name of the account holders	Signature (s)
1.	
2.	
3.	

Name as per Demat account :

DP Id	Client Id	Names of the accountholders
		1.
		2.
		3.

Note: Separate Transposition form should be filled by the joint holders for securities having distinct ISINs.