FORM No: FR-08

Abhipra Capital Limited

Abhipra Complex, A-387, Dilkhush Industrial Area
G.T. Karnal Road, Azadpur, Delhi-110033
Phone No.: 91-11-52390909 Fax: 91-11-52390830

ANNEXURE HA

REPURCHASE / REDEMPTION FORM
(Pre-Printed nos.)

PARTICIPANT NAME	
DEPOSITORY PARTICIPANT DP-ID	
RFN	DATE

I/We offer the below mentioned securities for repurchase/ redemption and declare that my/ our Account be debited by the number of securities to the extent of my/ our repurchase/ redemption request and proceeds be paid to me/ us by cheque/ bank draft. I/We hereby declare that the below mentioned person(s) are the beneficial owners of the securities mentioned.

Account No.	
Account holder Name	
No. of securities to be Repurchased / Redeemed (in figure)	
In words (Integers)	
And (Fractions)	
Name of Security	
Name of Issuing Company	
Face Value	
ISIN	

Specimen Signature (s)

	Name	**Signature**
First / Sole Holder		(X)
Second Holder		(X)

Participant Authorisation

Received the above mentioned securities for repurchase/ redemption from :

Account No.												
ISIN												
Date												
Name of the first holder												

The application form is verified with the details of the beneficial owner's account and certified that the application form is in order. The account has sufficient balances to accept the repurchase/ redemption request. It is also certified that the beneficial owners signatures are verified and found in order.

The other details of the beneficial owners as extracted from the records are enclosed.

Forwarded by : Name

Signature (Seal)

Acknowledgement

Participant's Name Address and ID (pre-printed serial no.)

We hereby acknowledge the receipt of repurchase/ redemption request for _____ no. of securities of _____ (security details) from _____ (Name) holding a/c no. _____.

Participant's Signature
(Seal)

Date :

(X) indicates Signature