TRANSFER FORM

[This Transfer Form should be used by the Account Holders only for transferring securities from Claridge Stockbrokers (Pvt.) Ltd. (CSL) to another Stockbroker Firm/Custodian Bank of their choice.]

To: Central Depository Systems (Pvt.) Ltd. Ground Floor, M&M Center 341/5, Kotte Road, Rajagiriya Sri Lanka.

| Name of Account Holder | /s: | | | | | | | | | |
|---------------------------------|--|--------------------------|-----------------------|-----------------------|---------------------------|--|--|--|--|--|
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| Contact Number: | | | | | | | | | | |
| Please Note: In the event of Jo | int CDS Accounts, Margin Tradii | ng Accounts and Acco | unts for Lending Purp | oses, the address and | the contact number of the | | | | | |
| first named holder, Margin P | rovider and Bank/Financial Inst | itution (respectively) s | hould be included. | | | | | | | |
| (1) I/We* wish to t | ransfer the following securit | ies out of my/our* | | | | | | | | |
| Account No: | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | REFERENCE NO. | | | | | |
| QUANTITY | Company Code | Туре | Sub-Type | (Office use only) | | | | | | |
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| Signature/s of individual/ | joint account holders/ signa | ature(s) and/or Cor | nmon Seal for body | corporates. | | | | | | |
| 1 | 2. | | | 3. | | | | | | |
| | | | | | | | | | | |
| Date: | | | | | | | | | | |

| *I/We request t | inat the s | securries | , 111011 | ilonica . | 111 (1) 6 | ibove i | e trans | sierrec | i to my | //our | | | | | | | | |
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| Account No: | | | | | | | | | | | | |] | | | | | |
| With | | (| Name | of Stoo | ckbrok | er/Cus | todian | Bank) |) | | | | | | | | | |
| e/s of individual/ | /joint acc | count ho | lders/ | signatı | are(s) o | of auth | orized | officeı | r(s) an | d/or (| Comm | on Se | al for | body c | orpora | tes. | | |
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| | | | | | | | | | | | | | | | and Sta Stockbr | ımp o oker F | f the firm/ | ; |
| al Use | | | | | | | | | | | | | | | | | | - |
| by: | | Name | | | | | Signature | | | | | | Date | | | | | |
| | | Name | | | Signature | | | | | | | Date | | | | | | |
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| | Account No: With e/s of individual, by: ed by: (if any): | Account No: With e/s of individual/joint account account No: al Use by: ed by: (if any): | Account No: With e/s of individual/joint account ho al Use by: Na ed by: Na (if any): | Account No: With (Name e/s of individual/joint account holders/ al Use by: Name ed by: Name Name (if any): | Account No: Name of Stood (Name of Stood e/s of individual/joint account holders/signature) | Account No: Name of Stockbrok (Name of Stockbrok e/s of individual/joint account holders/signature(s) of the control of the co | Account No: Name of Stockbroker/Cus With (Name of Stockbroker/Cus e/s of individual/joint account holders/signature(s) of auth 2. 2 | Account No: Name of Stockbroker/Custodian (Name of Stockbroker/Custodian (Name of Stockbroker/Custodian 2 | Account No: With (Name of Stockbroker/Custodian Bank) e/s of individual/joint account holders/signature(s) of authorized officer 2 | Account No: Name Signature Name Signature | Account No: With (Name of Stockbroker/Custodian Bank) e/s of individual/joint account holders/signature(s) of authorized officer(s) and/or of the control | Account No: Name of Stockbroker/Custodian Bank) Name Signature | Account No: Name of Stockbroker/Custodian Bank) al Use by: Name Signature How Many Signature Name Signature Name Signature Name Signature (if any): | Account No: Name of Stockbroker/Custodian Bank) With (Name of Stockbroker/Custodian Bank) e/s of individual/joint account holders/signature(s) of authorized officer(s) and/or Common Seal for 2. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. | Account No: Name of Stockbroker/Custodian Bank) Name Signature Date | Account No: | Account No: | Account No: With (Name of Stockbroker/Custodian Bank) 2/s of individual/joint account holders/signature(s) of authorized officer(s) and/or Common Seal for body corporates. 2. 3. Authorised Signature and Stamp of the Stockbroker Firm/ Custodian Bank al Use by: Name Signature Date ed by: Name Signature Date (if any): |

 $[*] De lete\ in applicable\ words$