

**Electronic Clearing Service (Credit Clearing)
(Model Mandate Form)**

(Investor/Customers's option to receive payment through Credit Clearing Mechanism)
(Scheme Name and the Periodicity of payment)

1. INVESTOR/CUSTOMERS' Name : KHAN ABDULAZIZ KARAMHUSSAIN

2. PARTICULARS OF BANK ACCOUNT

A. BANK NAME : BANK OF BARODA

B. BRANCH NAME : govandi
ADDRESS : govandi

TELEPHONE NO. : 02225581108

C. 9 DIGIT CODE NUMBER OF : 400012061
THE BANK & BRANCH
(Appearing on the MICR Cheque issued by the Bank)

C.1. IFSC Code of Bank : BARB0CHEBOM

D. ACCOUNT TYPE : Saving Account
(S.B Account/Current Account or
Cash Credit with Code 10/11/13)

E. LEDGER NO./LEDGER FOLIO NO. :

F. ACCOUNT NUMBER : 18470100040735
(As appearing on the Cheque book)

G. Attached document for verification of Bank particular :

3. DATE OF EFFECT

I hereby declare that the particulars given above are correct and complete of the transaction is delayed or not effected at all for reasons of incompleten or incorrect information. I would not hold the user institution responsible. I have read the option invitation letter and agree to discharge responsibilitybexpected of me as a participant under the scheme.

(.....)
Date: **Signature of the Investor/Customer**

Certified that the particulars furnished above are correct as per our records.
(Bank's Stamp)

(.....)
Date: **Signature of the Authorised Official of Bank**