

Authorization for Direct Deposit and Reversal

I, **SHIV PRATAP SINGH RAJAWAT** authorize **PharmaAce Innovations LLP** to deposit my pay automatically to the account, indicated below and, if necessary, to adjust or reverse and recover any salary related excess or erroneous deposit amount, if any, from my account. This authorization will remain in effect till my continuation in job with the Company.

I **SHIV PRATAP SINGH RAJAWAT** further Authorize the **Bank Hongkong and Shanghai Banking Corporation Limited**, BUND GARDEN ROAD, PUNE BRANCH, to carry out credit or debit for above mentioned instances only if required by my employer/company.

Name as per Bank Account: **SHIV PRATAP SINGH RAJAWAT**

Bank account number: **106867997006** Salary Account.

IFSC Number: **HSBC0411002**

Employee Name: **SHIV PRATAP SINGH RAJAWAT**

Employee Code : **PA1557**

A handwritten signature in black ink, appearing to read 'SPRajawat', with a horizontal line drawn underneath it.

Signature of Employee: