Alfalah CLSA

ANNEXURE "A" SPECIMEN OF AUTHORITY LETTER
FOR AUTHORIZATION OF OPERATING A TRADING ACCOUNT

TO BE MADE ON STAMP PAPER OF RS. 200 DULY ATTESTED BY NOTARY PUBLIC

With reference to my / our trading account opened with you and pursuant of clause 1 of the Additional terms and conditions contained in trading account opening form:

1. I _____ S/o , W/o, D/o. _____

   holding CNIC / SNIC / NICOP / ARC / POC / PASSPORT No. _____ at present residing at _____

   _____

2. I _____ S/o , W/o, D/o. _____

   holding CNIC / SNIC / NICOP / ARC / POC / PASSPORT No. _____ at present residing at _____

   _____

3. I _____ S/o , W/o, D/o. _____

   holding CNIC / SNIC / NICOP / ARC / POC / PASSPORT No. _____ at present residing at _____

   _____

4. I _____ S/o , W/o, D/o. _____

   holding CNIC / SNIC / NICOP / ARC / POC / PASSPORT No. _____ at present residing at _____

   _____

by way of this letter hereby authorize Mr. _____ to transact in the account on my / our behalf. I/We confirmed that all transactions executed by the above mentioned Authorized Person shall not be questioned / disputed by me / us and shall be binding in all respects uopn the Account Holder(s).

I / We undertake in the event of termination / withdrawal of this authority, the Alfalah CLSA Securities (Private) Limited shall be notified immediately and promptly in writing.However all the transaction executed before the delivery of said notice to the broker shall be binding on Account Holders in all respects.

The details of authorized person along with specimen sign are listed below:

Name of Authorized person: _____ **Relationship with the Account Holder:** _____

CNIC / SNIC / NICOP / ARC / POC / PASSPORT No. _____ **Expiry Date:** _____

Address: _____

Res. Tel No.: _____ **Office Tel No.:** _____ **Fax No:.** _____

Mobile No.: _____ **E-mail:** _____

Specimen Signature: _____

SIGNATURES OF ACCOUNT HOLDERS

Name of Applicant:	Date:	Signature:
Name of Joint Applicant No 1:	Date:	Signature:
Name of Joint Applicant No 2:	Date:	Signature:
Name of Joint Applicant No 3:	Date:	Signature:

WITNESSES

1. Name:															**Signature:**
CNIC No.						–								–	
2. Name:															**Signature:**
CNIC No.						–								–	