



## **Instruction Slip for Client To Pool**

FOR NERL CLIENTS (Please fill in Block Letters Only) (To be filled in duplicate)

<b>Application No</b> : (To be filled by RP)																						
Date:																						
<u> </u>	1 1	I	l .																			
nter Repository Trai	nsaction	Yes	3	No																		
Repository Participa	int Name	S H	R E	E		В А	L	A J	I		M	U I	L T	I	С	О	M	M	О	D .	I	
T I E S P	R I V	A T	Е	L	I	M I	Т	E I	)													
Account Holder's D	etails:																					
RPID	R 1	7	2 4				CI	ient 1	D												I	
Name of Client																				$\top$	$\neg$	
Commodity Name	WH Code					eNWI	R No.						ty &		Unit	s		Transaction No. (To be filled by RP)				
											П							IIIIe	и ву	KP)	_	
-											$\vdash$	+									_	
-											++	+									-	
-											$\dagger \dagger$										-	
Client to Pool Deta	ils:																					
Clearing Member ID	M	5 0	0 1	1				Ti	adin	g M	lembe	r ID	0 0	9	5	1					$\neg$	
CONTRACT CODE																						
Client ID Settlement No								$\perp$	<u> </u>		Trac	ding C	lient	ID	<u> </u>					Щ		
Settlement Date			1												-				-	_		



	Fi	rst	Autl	hori	zed	Sig	nate	ory		Sec	ond	l Au	itho	rize	d S	igna	tor	у	Thi	rd /	Aut	hor	ized	Sig	ınat	ory	
Name																											
- Hame																											
Signature (As per RP Records)																											
	 			INP	 ERS	 SON	 I VE	 RIFI	CA	  ON (F	 OR	OFI	FICE	 E US	 SE C		·		 								
Application No:												]															
Client ID																											
Transaction No:																											
Employee Name																											
Employee Code Designation																											
Signature																											
Date																											

**Repository Participants Seal** 



PI FΔSF Τ	EAR HERE

										ı	Ac	kno	OW	ed	ge	me	nt	Rε	ce	JD.	Ţ														
Application N	o:																																		
We hereby ac	know	ledge	e the	rec	ceip	t yc	our	Ins	truc	tion	ı sli	p fo	r Cl	ien	t to	Po	ol /	Off	Ма	arke	et 1	Γraι	nsa	cti	on.										
Name of the C	Client																																		
Client ID																																			
Employee N	Name				<u> </u>													]																	
Employee (	Code																	_																	
Designation	1																																		
Signature																																			
																							F	Rep	osi	tory	/ Pa	artio	cipa	nt S	tam	p wi	th D	ate	& Time
																							F	Rep	oosi	tory	/ Pa	artio	cipa	nt S	Stam	ρ wi	th D	ate	& Time