

CHANGE IN ACCOUNT INFORMATION

Date: _____

Account Title: _____	Account No.: _____
----------------------	--------------------

Please Tick () the box required for amendment.

<input type="checkbox"/>	ADDRESS
--------------------------	----------------

Current Address: _____
New Address: _____
Permanent Address: _____

<input type="checkbox"/>	ADDRESS
--------------------------	----------------

<u>CURRENT</u>	<u>NEW</u>
Home: _____	Home: _____
Office: _____	Office: _____
Cell: _____	Cell: _____
Fax: _____	Fax: _____
Email: _____	Email: _____

<input type="checkbox"/>	ZAKAT STATUS
--------------------------	---------------------

<input type="checkbox"/> Enable (Zakat Declaration Form is Mandatory)
<input type="checkbox"/> Disable

<input type="checkbox"/>	DIVIDEND MANDATE	<input type="checkbox"/> Activate	<input type="checkbox"/> De-Activate
--------------------------	-------------------------	--	---

A/c Title: _____	Bank Account No.: _____
Bank Name: _____	City: _____ Branch: _____
Bank Address: _____	

<input type="checkbox"/>	NOMINATION (Attested Copy of CNIC Required)	<input type="checkbox"/> Activate	<input type="checkbox"/> De-Activate
--------------------------	--	--	---

<u>CURRENT NOMINEE</u>	<u>NEW NOMINEE</u>
Name: _____	Name: _____
Relationship: _____	Relationship: _____
CNIC : _____	CNIC: _____

Account Holder

Joint A/c Holder -1

Joint A/c Holder -2

Joint A/c Holder -3