

FINWIZARD TECHNOLOGY PRIVATE LIMITED

Nomination Form

Dear Sir/ Madam,																
I/We the sole holde	er / Jo	int ho	olders	/ Gu	ıardia	n (in d	case (of mir	nor) hereby declare	that:						
									lemat account. I account holders sl	nould t	oe ob	tained	d on t	his fo	<u>rm].</u>	
account, of all the	partio Joint	culars	whe		•	-			ntitled to receive s		•		, ,		•	
BO Account Deta	ils															
DP ID	1	2	0	9	2	1	0	0	Client ID							
Name of the Sole / I	First F	lolder	•													
Name of Second Ho	lder															
Name of Third Holde	er															

Nomination Details	Nominee 1	Nominee 2	Nominee 3
Nominee Name : *First Name:			
Middle Name:			
*Last Name			
*Address:			
*City:			
*State:			
*Pin:			
*Country:			
Telephone No:			
Fax No:			
Nomination Details	Nominee 1	Nominee 2	Nominee 3
PAN No:			
UID :			
Email ID:			
*Relationship with the BO:			
Date of birth (mandatory if Nominee is a minor):			

Regd. Office: Queens Paradise, 1st Floor, Curve Road, Shivajinagar, Bangalore - 560051 CIN No. U74900KA2015PTC080747;

SEBI REGN:INZ000209036, CDSL IN-DP-572-2021
Website: http://www.fisdom.com; Email:

Contact. 9642596425



FINWIZARD TECHNOLOGY PRIVATE LIMITED

Name of the Gua	ordion					1
of Nominee (if the						
nominee is mino						
*First Name:	<i>,</i> , ,.					
Middle						
Name:			••			
*Last Name			••			•••••
*Address of the						
Guardian of nom	ninee:					
*City:						
*State:						
*Country:						
*Pin:						
Age						
Telephone:						
Fax No:						
Email ID:						
*Relationship of	the					
Guardian with th						
Nominee:						
*Percentage of						
allocation of						
securities:						
*Residual						
Securities [ple	ease					
,	one					
nominee.			_			,
If tick not marked default will be						
first nominee]:	Je		_			
Note : Residual se with residual secur	rities rem nominee,	aining after distribution o then the first nominee w	f securitie	se choose any one nomires as per percentage of a ked as nominee entitled f	location. If you fail to	
This nomination shexecuted by me /		sede any prior nominatio	n made l	by me / us and also any t	estamentary document	
51		_				
Place:			oate:			
		First/Sole Holder		Second Holder	Third Holder	
Name						
Name						
Signature						

Note: **One witness** shall attest signature/ Thumb impression.

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			_															_
										First W	itness							
Names of Witne	SS																	_
Address of Witne	ess																	_
Signature of Wit	ness																	_
(To be filled by	y DP)																	
Nomination Forn	<u>п</u> ассер	ted	and re	aister	ed wi	de Re	egistra	ation N	lo				_date	ed				
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