

DIVIDEND MANDATE FORM

To:

The Registrar
FAMCO Associates (Pvt) Ltd.
8-F, Next to Hotel Faran, Nursery
Block-6, P.E.C.H.S, Shakra-e-Faisal
Karachi

Broker's Name
OR
Central Depository Company
(where shares are held in the
Investor Account Services)

1. I hereby authorize Avanceon Limited to directly credit cash dividend declared by it, if any, in the below mentioned bank account.

<i>i) Shareholder's Detail</i>	
Name of the shareholder	
Folio No. /CDC Participants ID A/c. No.	
CNIC No.*	
Passport No, (in case of foreign shareholder)**	
Land Line Phone Number	
Cell Number	

<i>(ii) Shareholder's Bank Detail</i>	
Title of the Bank Account	
Bank Account Number	
Bank's Name	
Branch Name and Address	

2. It is stated that the above-mentioned information is correct, that I will intimate the changes in the above mentioned information to the above addresses as soon as these occur.

Signature of the Shareholder

Note: The shareholder who hold shares in physical form are requested to submit the above-mentioned Dividend Mandate Form after duly filled in to Share Registrar concerned. The Shareholders who hold shares in Central Depository Company are requested to submit the above mentioned Dividend Mandate Form after duly filled in to their Participants/Investor Account Services of the Central Depository Company Limited.

*Please attach attested photocopy of CNIC

**Please attach attested photocopy of the Passport