

FORM NO. IEPF-7

[Pursuant to rule(13) of the Investor Education and Protection Fund Authority (Accounting, Audit, Transfer and Refund) Rules, 2016]



Statement of amounts credited to IEPF on account of shares transferred to the fund

Form language English Hindi

Refer instruction kit for details.

Note 1. Please adhere to the Process for uploading 'Investor wise details' as mentioned on the Acknowledgment, to be generated upon upload of this e-Form.

Note 2. Please take a note that this form has to be filed only for one Financial Year at a time.

1. (a) *Corporate identity number (CIN) of company
- (b) Global Location number (GLN) of the company
2. (a) Name of the company
- (b) Address of registered office of the company
- (c) *email ID of the company
3. * Name of Transfree Bank
4. * Bank Transaction ID
5. * Date of payment of amount to the fund (DD/MM/YYYY)
6. * Amount credited to the fund (in Rs.)
7. *Details of the amount transferred to bank account of the fund

S.No	Particulars	Amount (in Rupees)	Date by which amount should have been credited to the fund
(a)	Dividend on shares transferred to IEPF	7,500	01/10/2018
(b)	Proceeds realized on delisting of companies with respect to shares transferred to IEPF		
(c)	Proceeds realized on winding up of companies with respect to shares transferred to IEPF		
(d)	Others		
	Total	7,500	

8. *Financial year to which the amount relates

Attachments

1. * Copy of Resolution declaring dividend/ winding up order/ delisting order
2. Optional attachments, if any.

List of attachments

Declaration

I have been authorized by the Board of directors' resolution number * Dated (DD/MM/YYYY)
* to sign and submit this form.

To the best of my knowledge and belief, I declare that all the requirements of Companies Act, 2013 and the rules made thereunder in respect of the subject matter of this form and matters incidental thereto have been complied with. I also declare that all the information given herein above is true, correct and complete including the attachments to this form and nothing material has been suppressed.

*** To be digitally signed by**

Digitally signed
by SUNITA
GOENKA
DN: cn=SUNITA
GOENKA, o=, ou=, email=SUNITA.GOENKA@MCA21.SARVODAYA.CO

*** Designation**

*** DIN of the director; or PAN of the manager or CEO or CFO; or Membership number of the secretary.**

Note: Attention is also drawn to provisions of Section 448 and section 449 of Companies Act, 2013 which provide for punishment for false statement and false evidence.

For office use only:

Eform service request number(SRN) Eform filing date (DD/MM/YYYY)

Digital Signature of the authorizing officer

This eform is hereby approved

This eform is hereby rejected

Date of signing

(DD/MM/YYYY)