HINDUSTAN UNILEVER LIMITED TRANSMISSION FORM

 Name of the deceas 	ea sna	irenoiaer (a	as enc	orsec	a on the	e ceri	uricate)						
2. Folio No.													
3. Shares]									
4. Particulars of Share sheet)	certifi	cate(s): (if	space	is in:	sufficie	ent, p	lease at	tach	a sep	arate	;		
			istino	stinctive Nos.				No. of Shares					
5. Particulars of applic	cant(s)	in whose r	name(s), tra	nsmiss	sion i	s to be e	effec	ted.				
Name(s)Nam		Father's/Husband's Name						Occupation					
6. Address of First Hold	ler												
								ı	1	1			
							PIN						
7. ECS Code (the nine	Digit N	lumber app	oearin	ig in y	our Ch	neque	Leaf bo	otton	n line)				
(For verificati	on pur	pose pleas	se pro	vide ı	ıs a co	py of	your Ch	nequ	ie Lea	f)	—		
·			-		1								
8. Bank Mandate Detail	IS T												
Branch Name & Address													
Account Type													
Account Number													
9. Specimen signature	(s) of th	he annlicar	nt(s)										
Names(s		по аррпоаг	(0)			Sig	gnature(s)					
a)				_	_								
b)													
c)				_									
					-								
Attestation: I her (To be attested by a		test the abo alized Bank				fice S	Seal)						
		Si	gnatu	ıre									
			ame										
				_									
		Δ	Addres	ss _									