

E-DIVIDEND MANDATE FORM

Date: _____

The Manager
 C&K Management Associates (Pvt) Limited
 Share Registrar of
 Gatron (Industries) Limited
 Room No. 404, Trade Tower, Abdullah Haroon Road,
 Near Metropole Hotel, Karachi-75530

Subject: Bank account details for payment of Dividend through electronic mode

Dear Sir,

I/We/Messrs., _____
 _____, being a member of Gatron (Industries) Limited [the "Company"], hereby, authorize the Company, to directly credit cash dividends declared by the Company, in my bank account as detailed below:

(i) Shareholder's details:	
Name of the Shareholder	
Folio No.	
CDC Participant ID & Sub-Account No. /CDC IAS	
CNIC/NICOP/Passport/NTN No. (please attach copy)	
Contact Number (Landline & Cell Nos.)	
Shareholder's Address	
(ii) Shareholder's Bank account details:	
Title of Bank Account	
IBAN (See Note 1 below)	
Bank's Name	
Branch Name & Code No	
Branch Address	

It is stated that the above particulars given by me are correct and I shall keep the Company, informed in case of any changes in the said particulars in future.

Yours truly,

 Signature of Shareholder
 (Please affix company stamp in case of corporate entity)

Notes:

1. Please provide complete IBAN, after verification from your concerned bank to enable the company to electronic credit into your bank account.

The payment of cash dividend will be processed on the basis of the IBAN number alone. The company is entitled to rely on the IBAN number as per your instructions. The company shall not be responsible for any loss, damage, liability or claim arising, directly or indirectly, from any error, delay, or failure in performance of any of its obligations hereunder which is caused by incorrect payment instructions and / or due to any event beyond the control of the company.

CDC members are requested to submit with Participant/CDC Investor Account Services for incorporation of bank account.