



GlaxoSmithKline Pharmaceuticals Limited
Dr. Annie Besant Road, Worli, Mumbai 400 030

FORM OF REQUEST FOR CHANGE OF ADDRESS

Folio No(s):

I / We request you to effect change of my address in your records as follows:

My old address as appearing in the Company's records	My current address to be recorded

I am / We are enclosing the following documents towards proof of my identification and current address: *(please tick the appropriate boxes and attach the relevant documents to this Form)*

- | | | | | | |
|---|--------------------------|-----------------------|--------------------------|--|--------------------------|
| Passport / Driving License
<i>(with signature appearing thereon)</i> | <input type="checkbox"/> | Election ID Card | <input type="checkbox"/> | PAN Card
<i>(with signature appearing thereon)</i> | <input type="checkbox"/> |
| Aadhar Card | <input type="checkbox"/> | Credit Card Statement | <input type="checkbox"/> | Electricity/ Telephone bill
<i>(not more than 2 months old)</i> | <input type="checkbox"/> |

(Note: At least 2 of the above documents must be submitted, PAN card is compulsory. The documents submitted must be duly signed with banker's attestation thereon.)

I am / We are also providing below my current bank particulars for your records *(required only if bank particulars were not furnished to the Company earlier or if there is any change):*

Name of the Bank : _____

Address of the Bank : _____

Bank Account Number : _____

(Note: Copy of your relevant bank statement or a copy of a blank cancelled cheque leaf pertaining to the given bank account, with your name appearing thereon, must be submitted for verification)

Yours faithfully,

Name of the First / Sole Shareholder: _____

Signature of First Holder: Signature of Second Holder:

Signature of Third Holder: Date:



Note:

1. Change of Address will be effected only on receipt of this Form, duly completed, along with all requisite documents as mentioned above. Incomplete Form / Form with insufficient documents will not be acted upon and the same will be returned.
2. The signature of the Shareholder as appearing on the Form **must** match with his / her specimen signature on record with the Company.