

FORM NO. IEPF-2



Statement of unclaimed and unpaid amounts

[Pursuant to rule 5(8) of the Investor Education and Protection Fund Authority (Accounting, Audit, Transfer and Refund) Rules, 2016]

Form language English Hindi

Refer the instruction kit for filing the form.

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 - All fields marked in * are to be mandatorily filled.

1.(a) * Corporate identity number (CIN) of company/Bank Corporate Identification number (BCIN)

(b) Global Location number (GLN) of the company

2. (a) Name of the company/bank

(b) Address of registered office of the company/bank

21ST FLOOR, WORLD TRADE CENTER, BRIGADE GATEWAY,
NO.26/1, DR. RAJKUMAR ROAD, MALLESHWARAM WEST.
BENGALURU
Bangalore
Karnataka

(c) *email id of the company/bank

3. (a) *Financial year ended (DD/MM/YYYY)

(b) *Date of annual general meeting (AGM) or Due date whichever is earlier (DD/MM/YYYY)

4. *Whether registered with Reserve Bank of India (RBI) Yes No

5. Number of small shareholders of the company

6. Number of small depositors of the company

7. Details of unclaimed and unpaid amounts

(a) *Amount of Unclaimed and unpaid dividend

(b) *Amount of application moneys received and due for refund

(c) *Amount of matured deposits

(d) *Amount of matured debentures

(e) Interest accrued on the amounts referred to in clause (b) to (d) above

(i) *Application money due for refund

(ii) *Matured deposit with companies

(iii) *Matured debentures with companies

(f) *Sale proceeds of fractional shares arising out of issuance of bonus shares, merger and amalgamation

(g) *Redemption amount of preference shares

(h) Others

Total

Declaration

I have been authorised 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



* Designation

* DIN of the director; or PAN of the manager or CEO or CFO; or Membership number of the secretary; or PAN of Authorized person of the bank

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.

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This eform has been taken on file maintained by the IEPF Authority through electronic mode and on the basis of statement of correctness given by the company.