

Form No. SH-10**Register of shares or other securities bought-back**

[Pursuant to sub-section (9) of section 68 of the Companies Act, 2013 and rule 17 (12) of the Companies (Share Capital and Debentures) Rules 2014]

Name of the company:

Registered address :

1. Date of passing of special resolution at the meeting of the members authorizing buy-back of securities:
2. Date of approval by the Board:
3. Number, price and amount of shares or other specified securities authorized to be bought back:
4. Date of opening and closing of buy-back offer:
5. Date by which buy-back was completed:
6. Description of shares or other specified securities bought back by the company:

| S.No. | Folio number / DP Id/client ID number or certificate number of securities bought-back | Name of last holder of securities | *Category to which they belong | Date of buy- back |
|-------|---|---|--------------------------------------|----------------------|
| (1) | (2) | (3) | (4) | (5) |
| | | | | |

| Number of securities bought- back | **Mode of buy-back | Nominal value of securities | Price at which securities are bought back | Date of payment |
|---|-----------------------|--------------------------------|--|--------------------|
| (6) | (7) | (8) | (9) | (10) |
| | | | | |

| Amount paid for bought back securities | Cumulative total of securities bought-back | Date of/ cancellation / extinguishment and physical destruction of securities bought- back | Reference to entry in Register of members | Remarks |
|---|---|--|--|---------|
| (11) | (12) | (13) | (14) | (15) |
| | | | | |

*Indicate the category of securities that have been bought back

- Preference shares

- Equity shares
- Employees' Stock Option shares
- Sweat equity shares, etc

**Indicate whether the securities have been bought back from

- the existing security-holders on a proportionate basis
- the open market
- odd-lots of listed securities
- Employees' Stock Option
- Sweat equity
- any other mode, if so indicate the mode

2. Other relevant details, if any.

Place:

Signature of the authorized signatory

Date:

Name of the above person:

Designation: