FORM NO.IEPF-1A



Statement of amounts credited to

[Pursuant to rule 5 (4A) of the Investor **Investor Education and Protection Fund Education and Protection Fund Authority** (Accounting, Audit, Transfer and Refund) Rules, 2016] Form language o English o Hindi Refer instruction kit for details. Note 1 - Please adhere to the 'Process for uploading Investor-wise details' as mentioned on the Acknowledgment, to be generated upon upload of this eForm. 1.(a)*Corporate identity number (CIN) of company/ Pre fill Bank Corporate Identification number (BCIN) (b) Global Location Number (GLN) of company 2. (a) Name of the company/bank (b) Address of registered office of the company/bank (c) *Email id of the company/bank 3. Form through which payment was done Payment made through Form -1 Payment made through Form 1INV Others Pre fill 4. SRN of Form-1/1INV (Mandatory if the payment was made electronically) 5. *Challan Number/ Service request number (SRN) in respect of payment made to the fund 6.Date of payment of amount to the fund 7. Amount credited to the fund 8. Mode of payment Challan payment (cash, cheque, Demand draft) Online payment

9.*Details of the amount credited to the fund

	S.	Particulars	Amount	Date by which amount			
	No.		(in Rupees)	should have been			
				credited to the fund			
	(a)	Amount in the unpaid dividend accounts of companies					
	(b)	The application money received by companies for					
	(-)	allotment of any securities and due for refund					
	(c)	Matured deposits with companies Matured debentures with companies					
	(d) (e)	Interest accrued on the amounts referred to in clause (b)					
	(6)	to (d) above					
		(i) Application money due for refund					
		(ii) Matured deposits with companies					
		(iii) Matured debentures with companies					
	(f)	Sale proceeds of fractional shares arising out of					
	(1)	issuance of bonus shares, merger and					
		amalgamation					
	(g)	Redemption amount of preference shares					
	(h)	Grants and donation					
	(i)	Others					
		Total					
10	10. *Financial Year to which the amount related						
At	tachm	ents	List of attachmen	ts			
	1. *	Copy of Challan					
		Attach					
		Attach					
2. Optional attachments, if any. Attach Remove attach			nment				
	,	Declaration	*				
I n	ave bee	en authorized by the Board of directors' resolution numbe to sign and submit this form.	r*	Dated * (DD/MM/YYYY)			
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.							
*T0	*To be digitally signed by DSC Box						
*D	*Designation						

*DIN of the director; or PAN of the manager or CEO				
or CFO; or Membership number of the company				
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.				
Modify Check Form Prescrutiny Submit				
This eform has been taken on file maintained by IEPF Authority through electronic mode and on the basis of statement of correctness given by the company.				

FORM NO. IEPF-2

[Pursuant to rule 5 (8) and 7 (2B) of the Investor Education and Protection Fund Authority (Accounting, Audit, Transfer and Refund) Rules, 2016]



Statement of unclaimed and unpaid amounts and details of Nodal Officer

Form language o English o Hindi Refer instruction kit for details.

Note 1 - Please adhere to the 'Process for uploading Investor-wise details' as mentioned on the Acknowledgment, to be generated upon upload of this eForm.

Note 2 - All fields marked in * are to be mandatorily filled.

1. Purpose of filing
1. Turpose of filling
Statement of unclaimed and unpaid amounts
Appointment of Nodal Officer
Appointment of Deputy Nodal Officer
Updation of details of Nodal Officer only
Updation/Cessation of details of Deputy Nodal

2.(a)*Corporate identity number (CIN) of company/	Pre fill
Bank Corporate Identification number (BCIN)	110 1111

(b) Global	Location	Number	(GLN)	of company
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3. (a) Name of the company/bank			
(b) Address of registered office of	of the company/bank		

Officer only