

**NATIONAL AUTOMATED CLEARING HOUSE (NACH) MANDATE FORM**

To,  
**Lakshmi Machine Works Limited,**  
**SRK Vidyalaya Post,**  
**Perianaickenpalayam,**  
**Coimbatore-641020**

Dear Sirs,

FORM FOR NATIONAL AUTOMATED CLEARING HOUSE MANDATE FOR PAYMENT OF DIVIDEND.  
Please fill-in the information in CAPITAL LETTERS in ENGLISH ONLY.

Please TICK  wherever is applicable.

Master Folio No. 

--	--	--	--	--	--	--	--	--	--

-----For Office Use Only-----	
ECS Ref. No.	<input style="width: 100%;" type="text"/>

Name of First holder											
Bank name											
Branch name											
Branch code	<table border="1" style="margin: auto; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> <p style="font-size: small; margin-top: 5px;">(9 Digits Code Number appearing on the MICR band of the cheque supplied by the Bank). Please attach a xerox copy of a cheque or a blank cheque of your bank duly cancelled for ensuring accuracy of the banks name, branch name and code number.</p>										

Account type	Savings <input type="checkbox"/>	Current <input type="checkbox"/>	NRE / NRO <input type="checkbox"/>
--------------	----------------------------------	----------------------------------	------------------------------------

A/c No. (as appearing in the cheque book)	
IFS Code	

I, hereby, declare that the particulars given above are correct and complete. If any transaction is delayed or not effected at all for reasons of incompleteness or incorrectness of information supplied as above, the Company/RTA will not be held responsible.

I further undertake to inform the Company any change in my Bank/branch and account number.

Date: \_\_\_\_\_ (Signature of First holder)