

RPT ID : AM038R		CENTRAL DEPOSITORY SYSTEM 3		DD/MM/YYYY HH:MM:SS	
USER ID : XX000000 XXXXXXXXXXXXXXXX		EDIVIDEND REGISTRATION REPORT		Page No : 0000000	
PERIOD FROM DD/MM/YYYY TO DD/MM/YYYY					
PARTICIPANT CODE : 000 000		PARTICIPANT NAME : XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX		REGISTRATION DATE : DD/MM/YYYY	
ACCT NO	INVESTOR / CORPORATE NAME	OLD NRIC	STATUS OF ACCOUNT		
ID GROUP	ACCOUNT QUALIFIER	ACCOUNT TYPE	H/P NO.		
USER ID		NAME OF BANK			
CONSOLDN	CO REG NO / PASSPORT / NRIC	BANK ACCOUNT NO.	JOINT ACCOUNT		
00000000	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX		
XX000000	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXX	000-000-00000000		
XXXX	XXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXXXXXX			
Y/N		0000000000000000	Y/N		
	CORRESPONDENCE ADDRESS / TEL. NO	EMAIL ADD			
	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXXXXXXXXXXXXX			
	00000 XXXXXXXXXXXXXXXXX				
	XXXXXXXXXXXXXX				
	XXXXXXXXXX				
00000000	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX		
XX000000	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXX	000-000-00000000		
XXXX	XXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXXXXXX			
Y/N		0000000000000000	Y/N		
	CORRESPONDENCE ADDRESS / TEL. NO	EMAIL ADD			
	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXXXXXXXXXXXXX			
	00000 XXXXXXXXXXXXXXXXX				
	XXXXXXXXXXXXXX				
	XXXXXXXXXX				
TOTAL ACCOUNTS			: 000		
***** END OF REPORT *****					

RPT ID : AM040R	CENTRAL DEPOSITORY SYSTEM 3	DD/MM/YYYY HH:MM:SS	
USER ID : XX000000 XXXXXXXXXXXXXXXX	PRINCIPAL & NOMINEES EDIVIDEND REGISTRATION REPORT	Page No : 0000000	
PERIOD FROM DD/MM/YYYY TO DD/MM/YYYY			
PARTICIPANT CODE : 000 000	PARTICIPANT NAME : XX	REGISTRATION DATE : DD/MM/YYYY	
ACCT NO	INVESTOR / CORPORATE NAME	OLD NRIC	STATUS OF ACCOUNT
ID GROUP	ACCOUNT QUALIFIER	ACCOUNT TYPE	H/P NO.
USER ID		NAME OF BANK	
CONSOLDN	CO REG NO / PASSPORT / NRIC	BANK ACCOUNT NO.	JOINT ACCOUNT
00000000	XXX	X0000000	XXXXXXXXXX
XX000000	XXX	XXXXXXXXXX	000-000-00000000
XXXX	XXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXXXXXXXXXXXXX	
Y/N	XXXXXXX	0000000000000000	Y/N
	CORRESPONDENCE ADDRESS / TEL. NO	EMAIL ADD	
	XXX	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	
	00000 XXXXXXXXXXXXXXXXXXXX		
	XXXXXXXXXXXXXXXXXX		
	XXXXXXX		
I/We hereby :			
i. affirm that all the information stated in this eDividend report is correct as at the date of this report.			
ii. irrevocably consent to the disclosure by Bursa Depository, the issuer and their respective agents to any person, of such of my/our personal information as may be necessary or expedient to facilitate the payment of all cash dividends and other cash distributions that may be due to me/us in respect of the deposited securities in my/our securities account, directly into my/our bank account as stated in this report or as may be updated from time to time, or for any other purpose in connection with the payment of dividends via such manner.			
iii. irrevocably consent to receiving all cash dividends and other cash distributions that may be due to me/us in respect of the deposited securities in my/our securities account via direct credit into my/our bank account as stated in this report or as may be updated from time to time.			
iv. irrevocably consent to receiving electronic notifications in connection with cash dividends and other cash distributions being directly paid into my/our bank account, sent using my/our contact details as stated in this report or as may be updated from time to time.			

Signature of Authorised Signatory (ies)			
Affixation of commom seal or rubber-stamp (where applicable)			
Kindly delete whichever is not applicable.			
TOTAL ACCOUNTS	:	XXXX	
GRAND TOTAL ACCOUNTS	:	XXXX	
***** END OF REPORT *****			