

Folio No. \_\_\_\_\_

Application No. \_\_\_\_\_

Certificates No. \_\_\_\_\_

**(First Schedule to the Companies Act, 2017)  
Form for Transfer of Shares**

**The SHIFA INTERNATIONAL HOSPITALS LTD** \_\_\_\_\_

I / We \_\_\_\_\_ S/o \_\_\_\_\_ r/o \_\_\_\_\_  
\_\_\_\_\_ (hereinafter called "the transferor")  
in consideration of the sum of rupees \_\_\_\_\_ paid to me / us  
by \_\_\_\_\_ s/d/w/o \_\_\_\_\_ r/o \_\_\_\_\_

\_\_\_\_\_ hereinafter called the transferee(s), do  
hereby the said Transferee(s) the \_\_\_\_\_ Ordinary (or shares) with distinctive numbers from  
\_\_\_\_\_ inclusive, in the \_\_\_\_\_  
to hold unto the said transferee(s), his / her / their executor (s), administrator (s) and assigns, subject to the several  
conditions on which I / we held the same at the time of execution hereof, and I / we the said transferee (s), do hereby  
agree to take the said share (or shares) subject to the conditions aforesaid.

As witness our hands this \_\_\_\_\_ day of \_\_\_\_\_

**Signature** \_\_\_\_\_

**Transferor (Seller)**

Full Name \_\_\_\_\_  
S/D/W/o \_\_\_\_\_  
CNIC No. \_\_\_\_\_  
(in case of foreigner, Passport # \_\_\_\_\_  
Nationality \_\_\_\_\_  
Occupation \_\_\_\_\_  
Residential Address \_\_\_\_\_

Phone / Cell # \_\_\_\_\_

**Signature** \_\_\_\_\_

**Transferee (buyer)**

Full Name \_\_\_\_\_  
S/D/W/o \_\_\_\_\_  
CNIC No. \_\_\_\_\_  
(in case of foreigner, Passport # \_\_\_\_\_  
Nationality \_\_\_\_\_  
Occupation \_\_\_\_\_  
Residential Address \_\_\_\_\_

Phone / Cell # \_\_\_\_\_

Email Address \_\_\_\_\_

**WITNESS 1:**

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

Name \_\_\_\_\_

CNIC No. \_\_\_\_\_

Full Address \_\_\_\_\_

**WITNESS 2:**

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

Name \_\_\_\_\_

CNIC No. \_\_\_\_\_

Full Address \_\_\_\_\_

**Bank Account Details of Transferee for Payment of Cash Dividend**

(Mandatory in case of a listed company or optional for any other company)

It is requested that all my cash dividend amounts declared by the company may be credited into the following bank account

<b>International Bank Account Number (IBAN) - Mandatory (24 digits Number)</b>	_____
<b>Bank' Name &amp; Branch Code #</b>	_____
<b>Branch Name &amp; Address</b>	_____ _____

It is stated that the above-mentioned information is correct and that I will intimate the changes in the above-mentioned information to the company and the concerned Share Registrar as soon as these occur.

\_\_\_\_\_  
**Signature of the Transferee(s)**