

ON RS:200/= STAMP PAPER

POWER OF ATTORNEY FOR OPERATING TRADING ACCOUNT

KNOW ALL MEN BY THESE PRESENTS:

THAT I, _____, am maintaining a Trading Account (the said Account) with AKD TRADE, the online division of AKD Securities Limited (AKD Trade), having executed a Brokerage Account Agreement dated _____ (the said Agreement) with AKD Trade and I wish to appoint a legally constituted Attorney for the purposes of trading in Securities in my trading account and relevant operations of my CDC sub account.

NOW THEREFORE BY THESE PRESENTS, I, _____ son/wife/daughter of _____, resident of/ carrying on business at _____, do hereby ordain, constitute and appoint _____ son/wife/daughter of _____ presently residing at _____, whose specimen signature is given below, as my true and lawfully constituted Attorney to deal with and represent me to AKD Trade in relation to the operation of the Account and for purchase and sale of, including online trading in Securities, as defined in the Agreement (Brokerage Account Agreement) with AKD Trade with full power to conduct all transactions, receive and make payments from/to AKD Trade and to hold and/or to accept and give deliveries of Securities in accordance with the terms and conditions of the Agreement.

Without prejudice to the generality of the foregoing, the said Attorney shall have the power to do all or any of the following acts, things and deeds:

- 1. To place orders upon AKD Trade, for purchase and/or sale of Securities on my behalf by any means of communication mentioned in the said Agreement, and to honour such transactions on my behalf and to place appropriate margin in my Account with AKD Trade, in accordance with the terms and conditions of the Agreement.**
- 2. To make payments against purchases of Securities on Delivery versus Payment System (DVP), including advance payments to AKD Trade for purchases; to obtain deliveries of the Securities purchased from AKD Trade, both in physical form, as well as Book Entry Securities, by movements from any other Participants, with CDC and/or from any Sub-accounts of any sellers to the credit of my Sub-account with AKD Trade, or my Investor's Account with CDC, as and how the Attorney may deem appropriate subject to CDC Regulations amended from time to time. .**
- 3. To effect deliveries to AKD Trade against sale contracts, including advance deliveries, both in physical forms as well as Book Entry Securities by movements from my Investors' Account and/or from my Sub-account with AKD Trade or with any other Participant.**
- 4. To undertake Leverage Transactions (as introduced & allowed by the Exchange) through AKD Trade on my behalf on the terms and conditions contained in the said Agreement.**
- 5. To avail of Custodial Services of AKD Trade and appoint AKD Trade as custodian and pay the AKD Trade usual custodial charges, if any.**
- 6. To undertake electronic trading in Securities through AKD Trade and to obtain login details of my Account and to generally avail electronic trading facility made available by AKD Trade on my behalf in accordance with the terms and conditions of the Agreement.**
- 7. To meet all my general obligations and other liabilities to AKD Trade under the said Agreement.**
- 8. To request cash withdrawal and/or update the trading account details and CDC Sub Account details from time to time as deemed appropriate by the Attorney on my behalf.**

AND TO GENERALLY do all incidental or ancillary acts, things and deeds in connection with the safe-keeping, protection, sale, purchase and/or transfer of Securities subject to CDC Regulations, acquired, held or sold by me without assuming any liability for any losses or damages whatsoever.

I hereby undertake to ratify all acts, things and deeds done by the Attorney, which shall constitute as the acts, things and deeds done by me personally.

This Instrument shall remain valid and in full force and effect unless revoked by a written notice served upon the Attorney with a copy endorsed to AKD Trade and written and manually signed acknowledgements are obtained by me.

IN WITNESS WHEREOF, I executed this Power of Attorney on the day and year above mentioned.

Name of Account Holder: _____

Signature: _____

Account No.: _____

Name of Attorney: _____

CNIC No. _____

Address: _____

Phone No. _____

Signature: _____

WITNESSES:

1. _____

2. _____

Name: _____

Name: _____

Address: _____

Address: _____

ILB/hm