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BROKERAGE MODIFICATION FORM

				Date:				
Dear Sir, Kindly revis	e the brokera	ge rate for th	e following Clie	nts: -				
CLIENT COL	DE:	·						
Trading started Date:				A/c Opened Date:				
	RE	VENUE GIVE	N IN LAST 3 MO	NTHS				
MONTH I		MONTH II	MONTH II		MONTH III			
		-						
MCX	EXISTING	ì	REVISED					
INTRADAY					-			
DELIVERY								
Branch Head Name :					Branc	h Head Signatur	·e:	
Remarks	:				Client	Signature :		
				OR HO USE				
							<u></u>	
DETAILS NAME OF THE E	MPLOYEE		CAPTURED BY		V	ERIFIED BY		
					V	ERIFIED BY		