

## REQUEST FOR CHANGE IN SUB-BROKERAGE SLABS

To,  
M/s. Guinness Commodities Pvt. Ltd.,  
10, Canning Street, 3<sup>rd</sup> Floor,  
Kolkata – 700 001.



Date :

Form A1-C

Dear Sir,

Ref: Rem A/c. **REM** \_\_\_\_\_ in the name of \_\_\_\_\_ for Branch **B**

I/ We hereby propose you to revise my/ our Sub-brokerage slabs as per the given structure:-

| Present Slab |          |                |         |
|--------------|----------|----------------|---------|
| SEGMENT      | CO.SHARE | S.BROKER SHARE | MINIMUM |
| MCX , NCDEX  |          |                |         |

| Proposed Slab |          |                |         |
|---------------|----------|----------------|---------|
| SEGMENT       | CO.SHARE | S.BROKER SHARE | MINIMUM |
| MCX , NCDEX   |          |                |         |

| Reason for above change*                      |         |          |
|---|---------|----------|
| Particulars                                   | Present | Proposed |
| Gross Monthly Avg. Brokerage (Last 12 Months) |         |          |
| Net Monthly Avg. Brokerage (Last 12 Months)   |         |          |
| Turn over Monthly Avg. (Last 12 Months)       |         |          |
| NO. OF CLIENTS                                |         |          |

*\*Reason columns should be filled in*

You are hereby requested to revise the brokerage sharing slabs as proposed above.

I further agree that if within three months I fail to achieve the proposed brokerage as above, then the Company may change my brokerage back to the old slab.

Thanking You.

Yours faithfully,

(Authorised Signatory)

| FOR BACK OFFICE USE ONLY  |                                |                               |
|---|--------------------------------|-------------------------------|
| Proposal received & approved / rejected   |                                |                               |
| Comments:   |                                |                               |
| If approved then date of effect :   |                                |                               |
| _____<br><b>Approved By</b>   | _____<br><b>A/c Department</b> | _____<br><b>Record Keeper</b> |
| Note:   |                                |                               |
| 1. Approved requests received on or after 1 <sup>st</sup> day of the month will not be considered for the calculation of Sub brokerage for the preceding month. |                                |                               |
| 2. Fraction in Minimum Brokerage is not acceptable.   |                                |                               |