

DIVIDEND MANDATE FORM (Optional)

The Manager Shares
Famco Associates (Pvt) Limited
8-F, Next to Hotel Faran, Nursery,
Block-6, P.E.C.H.S., Shahrāh-e-Faisal, Karachi.

I, Mr./Mrs./Ms.....S/O,D/O,W/O.....hereby authorize Lotte Chemical Pakistan Limited to directly credit cash dividend declared by it, if any, in the below mentioned bank account.

(i) Shareholder's Detail	
Name of the Shareholder	
Folio No./CDC Participants ID A/C No.	
CNIC No.*	
Passport No. (In case of foreign Shareholder)**	
Landline Phone Number	
Cell Number	

(ii) Shareholder's Bank Detail	
Title of Bank Account	
Bank Account Number	
Bank Name	
Branch Name and Address	

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 Shareholder

Shareholders having their accounts with Central Depository Company (CDC) have to communicate mandate information to relevant Member Stock Exchange.

*Please attach attested photocopy of the CNIC.

**Please attach attested photocopy of the Passport.