

Annexure – 4
(on the letterhead of the Authorized person)

Shareholding Pattern of _____ *(name of Authorized Person)*
as on _____ *(date)*

Sr. no.	Name \$	Number of Shares held	Paid-up value per share Rs.	Amt paid-up Rs.	% age of total
1.					
2.					
3.					
4.					
5.					
Others					
TOTAL					100%

Place:

Signature(s)

Signature of Director of the Authorised Person

With Stamp of the Authorised Person

CERTIFICATE

This is to certify that the Shareholding in M/s. _____ as given above, based on my/our scrutiny of the books of accounts, records and documents is true and correct to the best of my/our knowledge and as per information provided to my/our satisfaction.

Date:

Place:

For (Name of Certifying Firm)

Name of the Partner/Proprietor

Chartered Accountant/Company Secretary

Membership Number