

FORM NO. PAS-6

[Pursuant to sub-rule (8) of rule 9A
Companies (Prospectus and Allotment
of Securities Rules, 2014.)]



Reconciliation of Share Capital Audit Report (Half-yearly)

Form language English Hindi

Refer the instruction kit for filing the form.

1. (a) * Corporate Identification Number (CIN)

2. (a) Name of the company

(b) Address of Registered
office of the company

(c) * Email id of the company

(d) Phone Number

3. * ISIN

4. * Period of Filing

From

To

5. * Details of Capital of Company

		Number of shares	Percentage of Total Issued Capital
(a)	Issued Capital		
(b)	Held in dematerialised form in CDSL		
(c)	Held in dematerialised form in NSDL		
(d)	Held in Physical form		
(e)	Total No. of shares [(b) + (c) + (d)]		

6. Reasons for difference in 5(a) and 5(e)

7. Details of changes in share capital during the half-year under consideration as per Table below:

Particulars	No. of Shares	Whether intimated to NSDL	Whether intimated to CDSL
Rights			
Bonus			
Private Placement			
ESOPs			
Amalgamation Conversion			
Buy back			
Capital Reduction			
Forfeiture			
Any other (Please Specify)			

8. * Details of Shares held by:

	Demat	Physical	Total
Promoters			
Directors			
KMPs			

9 (a) * Whether the Register of Members is updated Yes No

(b) If no, the date upto which it has been updated

10. * Whether there were dematerialised shares in excess in the previous half-yearly period

Yes No

11. * Has the company resolved the matter mentioned in point no. 10 above in the Current half-year

Yes No

If no, give details and reasons thereof

12. * Mention the total no. of demat requests, if any, confirmed after 21 days and the total no. of demat requests pending beyond 21 days with the reasons for delay:

Total no. of demat requests	No. of requests	No. of shares	Reasons for delay
Confirmed after 21 days			
Pending for more than 21 days			

13. Details of Company Secretary of the Company, if any:

PAN

Name

Membership Number

Address

E-mail

Telephone No.

14. *Details of CA/CS certifying this form:

Name

Address

E-mail

Telephone No.

15. *Whether there is appointment of common agency for share registry work Yes No

16. Any other details that the professional signing this form may like to provide:

Attachments

1. Optional Attachments, (if any).

List of Attachments

Verification

I am authorized by the Board of Directors of the Company vide resolution no * dated * to sign this form and declare that all the requirements of Companies Act, 2013 (18 of 2013), the Depositories Act, 1996 (22 of 1996) and the rules/regulations made thereunder in respect of the subject matter of this form and matters incidental thereto have been complied with. I also declare that all the information given herein above is true, correct and complete including the attachments to this form and nothing material has been suppressed. It is hereby further certified that the professional (Name and Type i.e. CA/CS) certifying this form has been duly engaged for this purpose.

*To be digitally signed by

Director or manager or secretary or CEO or CFO of the company

Designation

*DIN of the director; PAN of the Manager or CEO or CFO or
Membership number of the Company Secretary

Certificate by practicing professional

I declare that I have been duly engaged for the purpose of certification of this form. It is hereby certified that I have gone through the provisions of the Companies Act, 2013 (18 of 2013), the Depositories Act, 1996 (22 of 1996) and rules/regulations made thereunder for the subject matter of this form and matters incidental thereto and I have verified the above particulars (including attachment(s)) from the original records maintained by the Company

which is subject matter of this form and found them to be true, correct and complete and no information material to this form has been suppressed. I further certify that:

- The said records have been properly prepared, signed by the required officers of the Company and maintained as per the relevant provisions of the Companies Act, 2013, and the Depositories Act, 1996 and were found to be in order;
- All the required attachments have been completely and legibly attached to this form;
- It is understood that I shall be liable for action under Section 448 of the Companies Act, 2013 for wrong certification, if any found at any stage.

*To be digitally signed by

Chartered accountant (in whole-time practice) or

Company secretary (in whole-time practice)

*Whether associate or fellow Associate Fellow

*Membership number

*Certificate of Practice number

Note: Attention is also drawn to provisions of section 448 of the Act which provide for punishment for false statement and certification.

This eform has been taken on file maintained by the Registrar of Companies through electronic mode and on the basis of statement of correctness given by the filing company.