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**COMMON
REVISION FORM**



To,
The Board of Directors
GRAPHISADS LIMITED

GRAPHISADS LIMITED - INITIAL PUBLIC ISSUE REVISION - NR
Registered Office: 4/24 A, AB House, Asaf Ali Road, Near Delhi Gate, New Delhi - 110002 India.
Tel No.: +919871276731; Email: cs@graphisads.com; Website: www.graphisads.com
Contact Person: Mr. Shobharam Dhama, Company Secretary and Compliance Officer. CIN: U35999DL1987PLC029334

FIXED PRICE ISSUE
ISIN: INE0POU01017

**Application
Form No.**

**FOR NON-RESIDENTS AND ELIGIBLE
NRI'S, FIIS, FVCIS, ETC. APPLYING ON A
REPATRIATION BASIS**

ISSUE OPENS ON: THURSDAY NOVEMBER 30, 2023
ISSUE CLOSES ON: TUESDAY DECEMBER 05, 2023

SYNDICATE MEMBER'S STAMP & CODE	REGISTERED BROKER/SCSB/CDP/RTA STAMP & CODE
SCSB BRANCH STAMP & CODE	SUB-BROKER'S/SUB-SYNDICATE'S/SUB-AGENT'S STAMP & CODE
BANK BRANCH SERIAL NO.	SCSB SERIAL NO.

1. NAME & CONTACT DETAILS OF SOLE / FIRST APPLICANT

Mr./Ms./M/s. _____

Address _____

Email _____

Tel. No. (with STD code) / Mobile _____

2. PAN OF SOLE / FIRST APPLICANT

3. INVESTOR'S DEPOSITORY ACCOUNT DETAILS ☐ NSDL ☐ CDSL

For NSDL enter 8 digit DP ID followed by 8 digit Client ID / For CDSL enter 16 digit Client ID

PLEASE CHANGE MY APPLICATION ☐ **PHYSICAL**

4. FROM (AS PER LAST APPLICATION OR REVISION)

Options	No. of Equity Shares applied (Application must be in multiples of 1200 equity shares)	Price per Equity Share ₹ 111/- (In Figures)																
		(In Figures)				Issue Price				Discount, if any				Net Price				
		7	6	5	4	3	2	1	4	3	2	1	4	3	2	1		
Option 1																		
(OR) Option 2																		
(OR) Option 3																		

5. TO (REVISED APPLICATION)

Options	No. of Equity Shares applied (Application must be in multiples of 1200 equity shares)	Price per Equity Share ₹ 111/- (In Figures)																
		(In Figures)				Issue Price				Discount, if any				Net Price				
		7	6	5	4	3	2	1	4	3	2	1	4	3	2	1		
Option 1																		
(OR) Option 2																		
(OR) Option 3																		

6. PAYMENT DETAILS [IN CAPITAL LETTERS] **PAYMENT OPTION : FULL PAYMENT**

Amount blocked (₹ in figures) _____ (₹ in words) _____

ASBA Bank A/c No. _____

Bank Name & Branch _____


OR

UPI ID (Maximum 45 characters) _____

I/WE (ON BEHALF OF JOINT APPLICANTS, IF ANY) HEREBY CONFIRM THAT I/WE HAVE READ AND UNDERSTOOD THE TERMS AND CONDITIONS OF THIS REVISION FORM AND THE ATTACHED ABRIDGED PROSPECTUS AND THE GENERAL INFORMATION DOCUMENT FOR INVESTING IN THE PUBLIC ISSUE (GID) AND HEREBY AGREE AND CONFIRM THE 'INVESTORS UNDERTAKING' AS GIVEN OVERLEAF. I/WE (ON BEHALF OF JOINT APPLICANTS, IF ANY) HEREBY CONFIRM THAT I/WE HAVE READ THE INSTRUCTIONS FOR FILLING UP THE APPLICATION FORM GIVEN OVERLEAF.

7A. SIGNATURE OF SOLE / FIRST APPLICANT	7B. SIGNATURE OF ASBA BANK ACCOUNT HOLDER(S) (AS PER BANK RECORDS)	REGISTERED BROKER / SCSB / CDP / RTA STAMP (Acknowledging upload of Application in Stock Exchange system)
Date: _____, 2023	I/We authorize the SCSB to do all acts as are necessary to make the Application in the Issue 1) _____ 2) _____ 3) _____	

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GRAPHISADS LIMITED
INITIAL PUBLIC ISSUE - REVISION - NR

**Acknowledgement Slip
for Registered Broker/
SCSB/CDP/RTA**

**Application
Form No.**

PAN of Sole / First Applicant _____

DP ID / CL ID	_____	_____
Additional Amount Blocked (₹ in figures)	Bank Name & Branch	SCSB Branch Stamp & Signature
ASBA Bank A/c No./UPI ID	_____	
Received from Mr./Ms.	_____	
Telephone / Mobile	Email	

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Issue Price	In Figures	In Words
Amount Blocked (₹)		

Stamp & Signature of Registered Broker / SCSB / CDP / RTA

ASBA Bank A/c No./UPI Id: _____

Bank Name & Branch

Important Note : Application made using third party UPI Or ASBA Bank A/c are liable to be rejected.

Name of Sole / First Applicant

Acknowledgement Slip for Applicant

**Application
Form No.**