



# Galaxy Capital Limited

TREC holder of Chittagong Stock Exchange Ltd.  
Full Service Depository Participant  
Head Office: Eastern Arjoo Complex ( 7<sup>th</sup> Floor ), 61,Bijoy Nagar,Dhaka-1000.  
Tel: 01713363045, E-mail : [galaxycapital.cse@gmail.com](mailto:galaxycapital.cse@gmail.com)

## Authorization Letter

Date:

Branch Manager

Account No:

\_\_\_\_\_ Branch

BO No:

Galaxy Capital Limited

Name of the A/C Holder:

Dear Sir,

I hereby authorize Mr./Ms. \_\_\_\_\_

Address: \_\_\_\_\_ Contact No: \_\_\_\_\_

to collect the document(s)/item(s) mentioned below on my behalf.

<input type="checkbox"/> Portfolio Statement	<input type="checkbox"/> Ledger Statement	<input type="checkbox"/> TAX Certificate
<input type="checkbox"/> DPA49 (Account Statement)	<input type="checkbox"/> DPA6 (Holding report)	<input type="checkbox"/> Other (Specify) _____

My authorized representative's signature is duly attested by me below.

\_\_\_\_\_  
**Signature of the Authorized Person**

**Attested by**

\_\_\_\_\_  
**Signature of Account Holder**

<b>FOR OFFICE USE ONLY</b>	<b>Client A/C No:</b>
Signature Verified	Charge realized
_____ Action Taken by	_____ Authorize by