For DFSA use only

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**Pricing Statement Form**

Name of Applicant:

Name of Sponsor:

|  |  |
| --- | --- |
| Description of Shares |  |
| Total number of Shares being placed/offered: |  |
| % discount if any |  |
| Where the discount is greater than 10% was shareholder approval sought? | Yes  / No |

|  |  |  |  |
| --- | --- | --- | --- |
| Signature of Director of the Applicant |  | Date |  |

|  |  |
| --- | --- |
| Name of Director of the Applicant |  |

Please return the completed form to:

**Dubai Financial Services Authority**

**Markets Division**

**Level 13, The Gate Building**

**Dubai International Financial Centre**

**PO Box 75850**

**Dubai, UAE**

Applicants are advised to retain a copy of the form and any relevant attachments for their records.