

<b>Evrofinance Mosnarbank</b> <b>DEPOSITARY</b>
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**OPERATION CANCELLATION ORDER:**

Registration number of the order (in the Depositor's registration system): \_\_\_\_\_

Date of completing the order: \_\_\_\_\_

**DATA ON THE DEPOSITOR:**

Name: \_\_\_\_\_

Custody account No.: \_\_\_\_\_

**We request to cancel the order on performance of the operation:**

Type of the order to be cancelled: \_\_\_\_\_

Ref. reg. No. of the order: \_\_\_\_\_

Inc. reg. No. of the order: \_\_\_\_\_

Value date: \_\_\_\_\_

**In respect of the following securities:**

Name of the issuer (bill drawer): \_\_\_\_\_

Type of security: \_\_\_\_\_

State registration No. of the issue: \_\_\_\_\_

Nominal value: \_\_\_\_\_

Quantity (items): \_\_\_\_\_

Quantity in words: \_\_\_\_\_

**GROUND:**

\_\_\_\_\_

\_\_\_\_\_  
Position

\_\_\_\_\_  
Signature

/ \_\_\_\_\_ /  
Surname and initials

Place of Seal

**DEPOSITARY'S NOTES ON ACCEPTANCE OF THE ORDER**

Registration No. of the order (in the Depository's registration system): \_\_\_\_\_

Date of acceptance of the order: \_\_\_\_\_

Signature of the person having accepted the order: \_\_\_\_\_