

NATIONAL MULTI-COMMODITY EXCHANGE OF INDIA LIMITED

CIRCULAR

Ref. No.: NMCE/2009-10/0036

September 16, 2009

Annual Submission for the Financial Year 2008-09

To,
The Members

In terms of Regulation 11.3.3 of the Exchange, all the members are required to file certain documents /details with the Exchange on an annual basis. Accordingly, members are advised to file the annual submission for the financial year ended 2008-09 with the Exchange, as per the list given below:

- 1) Financial Statements (Which includes Balance Sheet, Profit and Loss Accounts/ Income and Expenditure Account, Directors and Auditors Reports) duly certified by a Chartered Accountants (hereinafter referred as 'CA').
- 2) Net worth Certificate as per the format given in Annexure -I along with computation sheet duly certified by their Statutory Auditors.
- 3) Details of Membership of Commodity Exchange(s) other than that of NMCEIL.
- 4) Details of Directors/ Partners duly certified by CA. Format are given in Annexure – II.
- 5) Details of Dominant Promoter Group duly certified by CA
- 6) Undertaking from Relative/Corporate entities supporting the Dominant Promoter Group duly certified by CA.
- 7) Latest Share holding Pattern.
- 8) Latest Branch /Branches Details.
- 9) Details of the Compliance Officer.
- 10) Updated Member Details

All Formats are given below for your ready references

The Members, who have been activated for trading prior to 1st April 2009, are required to submit all the above mentioned documents latest by October 15, 2009 in respect of financial year ended 31st March 2009.

The members having their financial year ending other than 31st March 2009, are required to submit the said documents within aforesaid period for respective financial year. If Members follow different financial Year or have changed in their financial year, they are required to inform about such changes to Membership Department of the Exchange within 15days of issuance of this Circular.

Members are requested to ensure that all the above documents are submitted at a time before the due date. Piecemeal submission will not be entertained. Submission of incomplete/partial/piecemeal return shall be construed as non-submission. Non-compliance of the above may result in appropriate action including levy of late/non-submission charges which are as follows –

- Rs. 100/- per day of delay for the 1st month after the due date.
- Rs. 250/- per day of delay for the 2nd month after the due date.
- Thereafter, Rs. 500/- for every day of delay till the date of submission.

For and on behalf of
National Multi-Commodity Exchange of India Limited

Poonam Verma
(VP-Business Development)

Annexure-I

(On the letterhead of the Chartered Accountants)

The Members will have the option of computing their net worth as per any of the two methods given below. However, once a Member chooses one of the two given methods, he will have to continue to compute his net worth using the same method unless a change of method is specifically approved by the Exchange.

(Method – I)

NET WORTH CERTIFICATE

By valuation of the assets on the following basis (**As per L.C. Gupta committee recommendation**):

S.No.	Particulars	Amount (In Rupees)
A.	Listed investments at market value	
B.	Less: 30% margin on the above	
C.	Net value of listed shares [A-B]	
D.	Investment in unlisted companies	
E.	Less: 50% margin on the above	
F.	Net value of unlisted shares [D-E]	
G.	Other investments at cost like PPF, NSC, deposits with other exchanges, NBFC, Bank FDR.	
H.	Total net investment [C+F+G]	
I.	Market value of land & bldg	
J.	Less: 50% margin on above	
K.	Net value of fixed assets [I-J]	
L.	Debtors not exceeding 3 months	
M.	Current liabilities	
N.	Long term liability	
O.	Net worth [H+K+L]-[M+N]	

This is to certify that the net worth of M/s as on is Rs. (In Words).

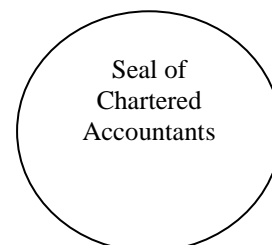
It is further to certify that the computation of net worth is based on my/our scrutiny of the books of accounts, records and documents, is true and correct to the best of my/our knowledge and as per information provided to my/our satisfaction.

Name:

Place:

Date:

For
Chartered Accountants



Name:
M No.:

OR

(On the letterhead of the Chartered Accountants)

(Method – II)

NET WORTH CERTIFICATE

The net worth should be computed either as per the format given below:

Paid up Capital *	
Net worth calculated as follows:	
Paid up Capital	
Add: Reserve & Surplus (excluding revaluation reserves)	
Less: Accumulated losses if any -	
Less: Miscellaneous Expenditure -	
Total Net worth	

* Give details of capital issued after the date specified above.

This is to certify that the net worth of M/s as on is Rs. (In Words).

It is further to certify that the computation of net worth is based on my/our scrutiny of the books of accounts, records and documents, is true and correct to the best of my/our knowledge and as per information provided to my/our satisfaction.

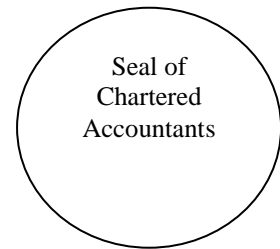
Name:

Place:

Date:

For

Chartered Accountants



Name:

M No.:

**SHARING PATTERN (FOR PARTNERSHIP FIRM)
(ON FIRM'S LETTER HEAD)**

Sr. No.	Name	Capital in the Firm	Share in Profits	Share in Losses
1				
2				
3				
4				
5				

Date:

Place:

Signature of Managing Partner(s)

Rubber Stamp:

CERTIFICATE

This is to certify that the Capital and Sharing Pattern of _____ as given above, based on my/our scrutiny of the books of accounts, records and documents is true and correct to the best of my/our knowledge and as per information provided to my/our satisfaction.

Date:

Place:

For (Name of Accounting Firm)

Name of Partner

**Chartered Accountants/Practicing Company Secretaries
Membership Number
Rubber Stamp**

UNDERTAKING FROM ALL PARTNERS AUTHORIZING THE MANAGING PARTNER (FOR PARTNERSHIP FIRM)

To
Membership Department
National Multi Commodity Exchange of India Limited
4th Floor H. K. House,
Behind Jivabhai Chambers,
Ashram Road,
Ahmedabad - 380 009.

Dear Sir,

We hereby authorize Mr. /Ms. _____ and Mr. /Ms. _____ to be the Managing Partner/s of the Firm to do all acts, deeds and things relating to the matters of the National Multi Commodity Exchange of India limited.

Further, Mr./Ms. _____ AND /OR Mr./Ms. _____ of the firm are also authorized to sign or execute jointly or severally all documents / agreements on behalf of the firm for operations of National Multi Commodity Exchange of India Limited.

Name of All Partners	Signature

Date:

Place:

For, **(Name of Member)**

Signature _____

Authorized Signatory
Name & Designation

Rubber stamp

Certificate dated _____
Submitted by _____ to NMCEIL

DETAILS OF DIRECTORS/PARTNERS/PROPRIETOR/SOCIETY MEMBERS

<u>Sr. No</u>	<u>Name of</u> <u>Individual/</u> <u>Proprietor/</u> <u>Partners/</u> <u>Directors</u>	<u>Age</u>	<u>Education</u>	<u>Designation</u> <u>since @</u>	<u>PAN</u>	<u>Experience</u> <u>No. of years #</u>	<u>Share holding</u> <u>In Percentage</u> <u>wise</u>	<u>Amount</u>	<u>Directorships /</u> <u>controlling share</u> <u>holding in other</u> <u>companies / entities</u>	<u>Email Id</u>
1										
2										
3										
4										

Date:

Place:

Signature(s)

NOTES:

@: Enclose the conduct Certificate / Status report from the other Commodity Exchange(s) for the companies.

#: For each of these memberships, give details of disciplinary action, if any, taken by the Commodity Exchange(s) or any other regulatory authority in respect of these memberships with dates in the following format:

- * Expulsion
- * Suspension
- * Default
- * Any other disciplinary action or enquiry against the member

CERTIFICATE (for corporate / Institutions only)

This is to certify that the Shareholding in _____ as given above, based on my/ our scrutiny of the books of accounts, records and documents is true and corrects to the best of my/our knowledge and as per information provided to my/our satisfaction.

Date:
Place:

For (Name of Accounting Firm)

Name of Partner

**Chartered Accountants/Practicing Company Secretaries
Membership Number**

**UNDERTAKING FROM RELATIVE OF PERSONS CONSTITUTING
DOMINANT PROMOTER GROUP
SUBMITTED BY Mr. / Mrs. _____**

I, Mr./ Mrs. , wife of Mr. _____, resident of _____
declared that I am the absolute owner of _____ shares of Rs. ___/- each of Rs. ___/- per
share paid-up, which constitutes _____% of the total paid up capital of the company
_____ as on this date.

I state that I shall irrevocably and unconditionally support in respect of my shareholding, Mr.
_____, a shareholder in the above mentioned company, I further state that I have
no objection to my above mentioned shareholding being clubbed with the shareholding of Mr.
_____, who is my husband/father for the purpose of determining the dominant
promoter group of the said company.

This support is irrevocable and I also undertake to give prior information to the NMCEIL the
before selling or otherwise transferring my part or whole of my above mentioned shareholding.

Witness By	:	Signature	:
Signature	:	Name	:
Name	:	Place	:
Address	:		
Date	:	Date	:

CERTIFICATE

This is to certify that the shareholding of Mr. /Mrs. _____ as given above, based on
my/our scrutiny of the books of accounts, records and documents is true and correct to the best
of my/ our knowledge and as per information provided to me/ our satisfaction.

**For,
Chartered accountants or Practicing Company Secretaries**

PLACE :
DATE :

MEMBERSHIP NO.

SUBMITTED BY _____ TO NMCEIL
DETAILS OF DOMINANT PROMOTER GROUP
AS ON _____

Sr. No.	Name of Dominant Shareholder(s)	Person(s) Supporting Dominant Shareholder(s)	Relation	No. of Shares held		Total Amount Paid		% of Total		% of Total
				Self	Relative	Self	Relative	Self	Relative	
	Total									

For, (Name of Applicant member)

Director

Place :

Date :

CERTIFICATE

This is to certify that the shareholding of Mr. / Mrs. _____ as given above, based on my/our scrutiny of the books of accounts, records and documents is true and correct to the best of my/ our knowledge and as per information provided to me/ our satisfaction.

PLACE :

DATE :

For,
Chartered accountants or Practicing Company Secretaries

MEMBERSHIP NO.

Rubber Stamp

Certificate dated _____
Submitted by _____ to NMCEIL
(on Company's Letter head)

Shareholding Pattern of _____ (Name Of Member) as on _____
Paid up capital _____ Rs.

Face Value of each equity share (or any other instrument): _____ Rs. _____

Present Share holding Pattern

<u>Sr. No</u>	<u>Name of the Share holders</u>	<u>No of Shares held</u>	<u>Share holding In %</u>	<u>Amount Paid Up</u>	<u>PAN</u>
1.					
2.					
3.					

Date:

Place:

Signature(s) with Company's Stamp
(Directors Signature with their name)

NOTES:

@: Enclose the conduct Certificate / Status report from the stock exchange for the companies.

#: For each of these memberships, give details of disciplinary action, if any, taken by the Stock / Commodity Exchange or any other regulatory authority in respect of these memberships with dates in the following format:

- * Expulsion
- * Suspension
- * Default
- * Any other disciplinary action or enquiry against the member

CERTIFICATE (for corporate / Institutions only)

This is to certify that the Shareholding in _____ as given above, based on my/our scrutiny of the books of accounts, records and documents is true and correct to the best of my/our knowledge and as per information provided to my/our satisfaction.

Date:

For (Name of Accounting Firm)

Place:

For,.....
Chartered Accountants /Practicing Company Secretaries.

Membership No.
Rubber Stamp

(On the letter head of the member)

Format for the Branch Details / Undertaking

To,
The Membership Department,
National Multi-Commodity Exchange of India Limited
4th Floor, H.K. House,
Behind Jivabhai Chambers,
Ashram Road,
Ahmedabad – 380009

Subject: - Details of Branch Office(s)

Dear Sir/Madam,

Sr.No.	Branch Name (Location)	Branch office Address	Contact Person at Branch Office	Telephone No.	Fax No.	Email Id
1						
2						
3						

I/We undertake that as on date there is no other branch accept as mentioned above

For, (Member Name)

Signature _____

(Individual – H.U.F (Karta) Proprietor/Partnership firm/Company)

Rubber stamp

(On the letterhead of the company)

To
The Membership Department
National Multi Commodity Exchange of India Limited.
5,4th Floor, H.K.House,
Behind Jivabhai Chambers,
Ashram Road,
Ahmedabad – 380 009

Dear Sir,

This is to inform you that I/We have appointed _____ (Name and designation of the Compliance Officer) as a Compliance officer in terms of Rules, Regulation and Business Rules of the Exchange.

Additional Information as required by you is provided as follows:

Name of the compliance officer*	Qualification*	Address of the Head office \ Branch office*	Contact: Tel. No.: /Fax. No.: / Mobile No. and Email ID*	Previous employment (Name of the Organization)*

I/We undertake to intimate and update the Exchange as and when there is any change in the aforesaid information being submitting to the Exchange

Yours Faithfully

For _____ (Name of the Member) With Company's Seal

Signature of the Compliance officer (Name of the Compliance officer)

Signature of Director/Partner (Name of the Director)
(Company's Rubber Stamp with Director's Sign)

Note: * = all fields to be filled compulsory

On the letterhead of the member

To,
The Membership Department,
National Multi-Commodity Exchange of India Limited
4th Floor, H.K. House,
Behind Jivabhai Chambers,
Ashram Road,
Ahmedabad – 380009

Subject: - Updated Details of our Membership Code _____

We are forwarding herewith updated details in the prescribed format for your kind information and records.

Thanking you,

Yours faithfully.

For, (Member Name)

Signature _____
(Individual – H.U.F (Karta) Proprietor/Partner/director)

Rubber stamp

Name of the Member:-		
Membership code:-		
Constitution : (Indicate whichever is applicable)(Individual – H.U.F (Karta) Proprietor/Partnership firm/Company)		
Member FMC – UMC Code:		
PAN of the member:- (Individual– H.U.F (Karta) Proprietor/Partnership/Company)		
Member's Office address:-		
Registered office address:-	Address	
	Address -1	
	City	
	State	
	Pin code	
	Telephone No	
	Fax No	
Correspondence office address:-	Address	
	Address -1	
	City	
	State	
	Pin code	
	Telephone	
	Fax No	

Name of the Compliance Officer/Contact Person:-	
Contact detail of the Compliance officer /Contact Person's Phone No. :-	
Mobile No. :-	
Fax No. :-	
Compliance officer/Common Email id of Member	

For, (Member Name)

Signature _____
(Individual – H.U.F (Karta) Proprietor/Partner\director)

Rubber stamp

Details of the (TM/TCM/ICM) Member as on date (_____)
 (Individual - Proprietor/Partnership firm/Company)

Sr.No	Name of the TM/TCM/ICM Member proprietor- H.U.F (Karta) /Partners/Directors:-	PAN	Designation	Education	Address	Telephone No.	Mobile No.	Fax No.	Name of the TM/TCM/ICM Email id of Proprietor – H.U.F (Karta) /Partners/ Directors	Whether the director (s) or its partner (s) at any time convicted of any offence. If so, furnish the details if any disciplinary and criminal history. Yes/No	Whether the director (s) or partner(s) declared insolvent/ bankrupt/ or declared defaulter by the exchange/ commodity/ stock market. If yes, furnish details Yes/No
1											
2											
3											
4											
5											

*If Yes Please provide details

For, (Member Name)

Signature _____

(Individual – H.U.F (Karta) Proprietor/Partner\director)

Rubber stamp