Evrofinance Mosnarbank DEPOSITARY

OPERATION CANCELLATION ORDER:

Registration number of the order (in the Desystem): Date of completing the order:	epositor's registration		
DATA	ON THE DEPOSITO	OR:	
Name:			
Custody account No.:			
We request to cancel th	e order on performai	nce 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	t of the following secu	ırities:	
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	Surna	me and initials
Place of Se	eal		
DEPOSITARY'S NO	TES ON ACCEPTANCE	OF THE ORDER	
Registration No. of the order (in the Depositary's regi	istration system):		
Date of acceptance of the order:			
Signature of the person having accepted the order:			