

Affix
Current
Passport

(To be stamped by Bankers)

Write your name at the back of
your passport photograph

E-DIVIDEND MANDATE ACTIVATION FORM

Instruction

Only Clearing Banks are acceptable

Please complete all section of this form to make it eligible for processing and return to the address below

The Registrar,

Apel Capital & Trust Ltd.
8, Alhaji Bashorun Street
Off Norman Williams Str, S.W Ikoyi Lagos.

I\We hereby request that henceforth, all my\our Dividend Payment(s) due to me\us from my\our holdings in all the companies ticked at the right hand column be credited directly to my \ our bank detailed below:

Bank Verification Number

Bank Name

Bank Account Number

Account Opening Date

Shareholder Account Information

Surname / Company's Name First Name Other Names

Address :

City State Country

Previous Address (If any)

CHN (If any)

Mobile Telephone 1 Mobile Telephone 2

Email Address

Signature(s) Company Seal (If applicable)

Joint\Company's Signatories

TICK	NAME OF COMPANY	SHAREHOLDER'S ACCOUNT NO.
<input type="checkbox"/>	AIICO BALANCED FUND	
<input type="checkbox"/>	ANINO INT'L PLC	
<input type="checkbox"/>	ARBICO PLC	
<input type="checkbox"/>	CHAPEL HILL DENHAM MONEY MARKET FUND	
<input type="checkbox"/>	INTERLINKED TECHNOLOGIES PLC	
<input type="checkbox"/>	INTERNATIONAL BREWERIES PLC	
<input type="checkbox"/>	LASACO ASSURANCE PLC	
<input type="checkbox"/>	LEAD UNIT TRUST SCHEME	
<input type="checkbox"/>	MASS TELECOM INNOVATION PLC	
<input type="checkbox"/>	MUTUAL TRUST MICROFINANCE BANK LTD	
<input type="checkbox"/>	NCR (NIGERIA PLC	
<input checked="" type="checkbox"/>	NEM INSURANCE PLC	
<input type="checkbox"/>	PARAMOUNT EQUITY	
<input type="checkbox"/>	PHARMA DEKO PLC	
<input type="checkbox"/>	THE INITIATES PLC	

"This service costs N150.00 per approved mandate per company"

SECOND FOLD HERE

Please Affix
Postage Stamp

FIRST FOLD HERE

Apel Capital Registrars Limited
8, Alhaji Bashorun Street
Off Norman Williams
Crescent South West Ikoyi
Lagos

THIRD FOLD HERE