

Affix Current
Passport

(To be stamped by Bankers)

Write your name at the back
of your passport photograph

e-DIVIDEND ACTIVATION FORM

PLEASE COMPLETE IN BLOCK LETTERS

Title:	Mr. <input type="checkbox"/>	Mrs. <input type="checkbox"/>	Miss. <input type="checkbox"/>	Date								
Others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<table border="1" style="width: 100%; text-align: center;"> <tr> <td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> </table>	D	D	M	M	Y	Y	Y	Y
D	D	M	M	Y	Y	Y	Y					

I/We, hereby request that henceforth, all my/our dividend/coupon payment due to me/us from the paying company indicated below be paid to my/our bank account stated hereunder.

Bank Verification Number (BVN)

Bank Name

Bank Branch

Bank Address

Bank Account No:

Account Opening Date

SHAREHOLDER'S ACCOUNT INFORMATION

INDIVIDUAL JOINT SHAREHOLDER CORPORATE SHAREHOLDER

Surname / Company's Name

First Name **Other Names (for individual Shareholders only)**

Shareholder's CHN (If Known) **C**

Current Postal Address

City **State** **Country**

Mobile (GSM) Phone Number

Land Phone Number/GSM

E-mail Address

Previous Postal Address (If any)

Kindly Select the Company(s) in which Shares are held:

TICK	NAME OF COMPANY	SHAREHOLDER'S ACCOUNT NUMBER
<input type="checkbox"/>	Avon Crown Caps & Con. (Nig.)	<input type="text"/>
<input type="checkbox"/>	BEMIL Nigeria Limited	<input type="text"/>
<input type="checkbox"/>	Capital Oil Plc.	<input type="text"/>
<input type="checkbox"/>	Channel Petroleum Plc.	<input type="text"/>
<input type="checkbox"/>	Stokvis Nigeria Plc	<input type="text"/>
<input type="checkbox"/>	FUMMAN Agric. Prod. Plc	<input type="text"/>
<input type="checkbox"/>	Heritage Bank Ltd.	<input type="text"/>
<input type="checkbox"/>	Int'l Energy Insurance Plc.	<input type="text"/>
<input type="checkbox"/>	Naturelle Extracts Plc.	<input type="text"/>
<input type="checkbox"/>	PANAfrican Capital Plc.	<input type="text"/>
<input type="checkbox"/>	Secure Electronic Tech. Plc.	<input type="text"/>
<input type="checkbox"/>	Spring Life Assurance Plc	<input type="text"/>
<input type="checkbox"/>	Swap Tech. & Telecoms Plc.	<input type="text"/>
<input type="checkbox"/>	United Mortgage Plc.	<input type="text"/>
<input type="checkbox"/>	<input type="text"/>
<input type="checkbox"/>	<input type="text"/>
<input type="checkbox"/>	<input type="text"/>
<input type="checkbox"/>	<input type="text"/>
<input type="checkbox"/>	<input type="text"/>
<input type="checkbox"/>	<input type="text"/>

Company Seal/Incorporation Number (Corporate Shareholder)

This form must be signed by ALL, the registered holders, executor(s) or Administrator(s)

Shareholder's Signature or Thumbprint	Shareholder's Joint/Company's Signature	Authorised Signature & Stamp of Your Bank
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