

Affix Current
Passport

e-DIVIDEND ACTIVATION FORM

INSTRUCTION: ➔ Please complete all section of this form to make it eligible for processing and return to the address above.
➔ Only Clearing Banks are Acceptable

Write your name at the back
of your passport photograph

PLEASE COMPLETE IN BLOCK LETTERS

Title:	Mr. <input type="checkbox"/>	Mrs. <input type="checkbox"/>	Miss. <input type="checkbox"/>	Date
Others				DDMMYYYY

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 Account No:	
Account Opening Date	DDMMYYYY

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)

Shareholder's Signature or Thumbprint	Shareholder's Signature \Joint
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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="checkbox"/>	BEMIL Nigeria Limited	
<input type="checkbox"/>	Capital Oil Plc.	
<input type="checkbox"/>	Channel Petroleum Plc.	
<input type="checkbox"/>	Stokvis Nigeria Plc	
<input type="checkbox"/>	FUMMAN Agric. Prod. Plc	
<input type="checkbox"/>	Heritage Bank Ltd.	
<input type="checkbox"/>	Int'l Energy Insurance Plc.	
<input type="checkbox"/>	Naturelle Extracts Plc.	
<input type="checkbox"/>	PANAfrican Capital Plc.	
<input type="checkbox"/>	Secure Electronic Tech. Plc.	
<input type="checkbox"/>	Spring Life Assurance Plc	
<input type="checkbox"/>	Swap Tech. & Telecoms Plc.	
<input type="checkbox"/>	United Mortgage Plc.	
<input type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/>	

Company Seal/Incorporation Number (Corporate Shareholder)

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

DISCLAIMER "In no event shall PAC REGISTRARS be liable for any damages, losses or liabilities including without limitation, direct or indirect, special, incidental, consequential damages, losses or liabilities, in connection with your use of this form or your inability to use the information, materials, or in connection with any failure, error, omission, defect, delay in operation or transmission, or system failure, even if you advice us of the possibility of such damages, losses of expenses, whether express or implied in respect of such information."