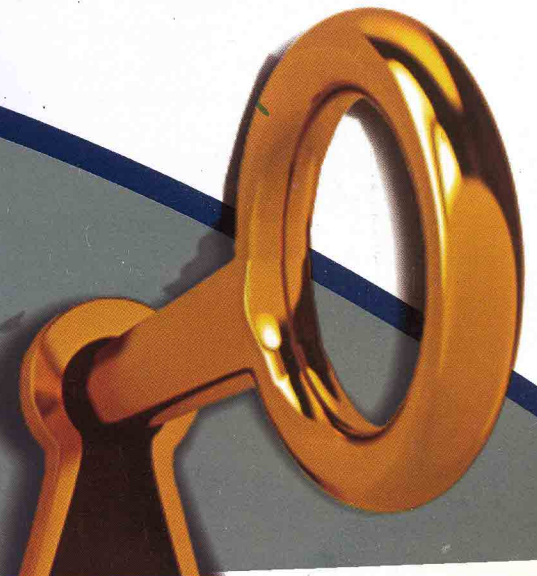


ACCOUNT OPENING FORM



RC: 695281

PAC Asset Management Limited

A member of PanAfrican Capital Group



PAC Asset Management

Equities ■ Fixed Income ■ Real Estate

SECTION A INDIVIDUAL ACCOUNT

| | |
|-------------------------------|----------------|
| TITLE: | |
| SURNAME: | |
| OTHER NAMES: | |
| RESIDENTIAL ADDRESS: | |
| MAILING ADDRESS: | |
| DATE OF BIRTH: | GENDER: |
| NATIONALITY: | OCCUPATION: |
| EMAIL: | MOBILE NUMBER: |
| NEXT OF KIN: | |
| ADDRESS: | |
| EMAIL: | MOBILE NUMBER: |
| INITIAL INVESTMENT VALUE (N): | |
| CHEQUE/BANK DRAFT ATTACHED | |

Please note: a monthly direct debit instruction should be duly executed with your bank indicating PAC Asset Management Ltd as the beneficiary and a copy of same should be submitted along with your forms. This subscription form must be accompanied with two (2) passport photograph and means of identification (i.e. International Passport, Drivers' Licence, Employer ID).

Please make your payments into following account;

Account Name PAC Asset Management Limited
Bank Access Bank Plc.
Account Number 0056483769

Signature

Date (DD/MM/YYYY)

SECTION B (Please complete in block letters & tick where appropriate)

CORPORATE ACCOUNT

| | | | |
|---|----------------------|--------|----------------------|
| DATE: | <input type="text"/> | RC NO: | <input type="text"/> |
| LEGAL NAME: | <input type="text"/> | | |
| REGISTERED ADDRESS: | <input type="text"/> | | |
| CORRESPONDENCE ADDRESS (if different from above): | <input type="text"/> | | |
| TYPE OF BUSINESS: | <input type="text"/> | TEL: | <input type="text"/> |
| WEBSITE: | <input type="text"/> | EMAIL: | <input type="text"/> |

SECTION C (Please complete in block letters & tick where appropriate)**INVESTMENT INFORMATION**SOURCE OF FUND (Specific) VALUE OF INITIAL INVESTMENT Cash ☐ VALUE (indicate currency) Securities ☐ VALUE (indicate currency) **INVESTMENT MANAGEMENT TYPE** (please tick as appropriate)DISCRETIONARY PORTFOLIO MANAGEMENT ☐NON-DICRETIONARY PORTFOLIO MANAGEMENT ☐**SECTION D** ACCOUNT MANDATEACCOUNT NAME ADDRESS:

| NAME | SPECIMEN SIGNATURE | CLASS |
|----------------------|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> |

Please Indicate Your Signature Mandate **Documentation Checklist****For Individual Account**

| | Yes | No |
|--|--------------------------|--------------------------|
| Duly completed form | <input type="checkbox"/> | <input type="checkbox"/> |
| Utility Bill, etc | <input type="checkbox"/> | <input type="checkbox"/> |
| Means of ID (International passport, D/License | <input type="checkbox"/> | <input type="checkbox"/> |
| Two Passport photograph | <input type="checkbox"/> | <input type="checkbox"/> |
| Signature mandate slip | <input type="checkbox"/> | <input type="checkbox"/> |

For Corporate Account

| | Yes | No |
|--|--------------------------|--------------------------|
| Duly Completed form | <input type="checkbox"/> | <input type="checkbox"/> |
| Utility Bill | <input type="checkbox"/> | <input type="checkbox"/> |
| Board Resolution | <input type="checkbox"/> | <input type="checkbox"/> |
| Cert. of Incorporation/Registration | <input type="checkbox"/> | <input type="checkbox"/> |
| form CAC 2, CAC 7 | <input type="checkbox"/> | <input type="checkbox"/> |
| Signature mandate | <input type="checkbox"/> | <input type="checkbox"/> |
| Two passport photographs each of signatories | <input type="checkbox"/> | <input type="checkbox"/> |

For office use onlyClient's Account No: Introduced By: Investment Manager (name & signature) **Due Diligence Approval**Due Diligence Conducted By: Due Diligence Approved By: Fund Manager's Approval: Executive Management Approval: