

Affix
Current
Passport

Write your name at the back of
your passport photograph



E-DIVIDEND MANDATE ACTIVATION FORM

Instruction

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

The Registrar,

ALL CROWN REGISTRARS LIMITED
190, Ikorodu Road,
Onipanu, Shomolu,
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
<input type="text"/>	<input type="text"/>	<input type="text"/>

Address :

City <input type="text"/>	State <input type="text"/>	Country <input type="text"/>
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Previous Address (If any)

CHN (If any)

Mobile Telephone 1 <input type="text"/>	Mobile Telephone 2 <input type="text"/>
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Email Address

Signature(s)

Company Seal (If applicable)

Joint/Company's Signatories

TICK	NAME OF COMPANY	SHAREHOLDER'S ACCOUNT NO.
<input type="checkbox"/>	BOC GASES NIGERIA PLC	<input type="text"/>
<input type="checkbox"/>	GREIF NIGERIA PLC	<input type="text"/>
<input type="checkbox"/>		<input type="text"/>
<input type="checkbox"/>		<input type="text"/>
<input type="checkbox"/>		<input type="text"/>

**Help Desk Telephone No/Contact Centre Information
for Issue resolution or clarification: 234-08023428713**