

## MANDATE FOR e-DIVIDEND

Dear Shareholder(s),

It is our pleasure to inform you that you can henceforth, collect your dividend through DIRECT CREDIT into your Bank Account. You may also have your outstanding warrants created directly into your CSCS Account. Consequently we hereby request you to provide the following information to enable us process direct payment of your dividend (when declared) into your Bank Account.

Kindly Select the Company's in which Shares are held

- |                                                            |                                                              |                                                            |
|------------------------------------------------------------|--------------------------------------------------------------|------------------------------------------------------------|
| <input type="checkbox"/> Bemil Nigeria Limited             | <input type="checkbox"/> Fumman Agric. Products & Ind. Plc.  | <input type="checkbox"/> Spring Life Assurance Plc.        |
| <input type="checkbox"/> Channel Petroleum Plc.            | <input type="checkbox"/> Heritage Banking Company Ltd.       | <input type="checkbox"/> Spring Mortgage Plc.              |
| <input type="checkbox"/> Capital Oil Plc.                  | <input type="checkbox"/> International Energy Insurance Plc. | <input type="checkbox"/> Stokvis Nigeria Plc               |
| <input type="checkbox"/> Fleet Technologies Ltd.           | <input type="checkbox"/> Naturelle Extracts Plc.             | <input type="checkbox"/> Nigerian Sewing Machine Plc       |
| <input type="checkbox"/> Niger State Government of Nigeria | <input type="checkbox"/> Secure Electronic Technology Plc.   | <input type="checkbox"/> Swap Technologies & Telecoms Plc. |

<b>SHAREHOLDER'S ACCOUNTS</b>	<b>Title:</b> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Miss. <input type="checkbox"/>	<b>Date</b> ( D D / M M / Y Y Y Y )	<b>CONTROL NO (Registrar's only)</b>
(IF KNOWN)	Others		

1. INDIVIDUAL  CORPORATE APPLICANT  PLEASE COMPLETE IN BLOCK LETTERS

<b>Surname / Company's Name</b>	
<input type="text"/>	
<b>Other Names (for individual applicant only)</b>	
<input type="text"/>	
<b>Full Postal Address</b>	
<input type="text"/>	
<b>City</b>	<b>State</b>
<input type="text"/>	<input type="text"/>
<b>Land Phone Number</b>	<b>Mobile (GSM) Phone Number</b>
<input type="text"/>	<input type="text"/>
<b>Email Address</b>	
<input type="text"/>	
<b>Next of Kin</b>	
<input type="text"/>	

2. JOINT APPLICANT Title: Mr.  Mrs.  Miss

<b>Surname</b>
<input type="text"/>
<b>Other Names (for individual applicant only)</b>
<input type="text"/>

4. BANK DETAILS (for E-Dividend)

<b>Name of Bank</b>	<b>Bank Sort Code</b>
<input type="text"/>	<input type="text"/>
<b>Branch</b>	<b>Shareholder's Bank Accounts No:</b>
<input type="text"/>	<input type="text"/>

<b>Shareholder's Signature or Thumbprint</b>	<b>Shareholder's Signature or Thumbprint</b>	<b>Company Seal/Incorporation Number (Corporate Shareholder)</b>
<input type="text"/>	<input type="text"/>	<input type="text"/>

When completed on behalf of corporate body, each signatory should state the representative capacity e.g. Company Secretary, Director etc.

<b>Authorised Signatures &amp; Stamp of your Bank (A)</b>	<b>Authorised Signatures &amp; Stamp of your Bank (B)</b>
<input type="text"/>	<input type="text"/>

This form must be signed by ALL, the registered holders, executor(s) or Administrator(s), Shareholder's Banker must sign to be valid