

## CONSOLIDATION/AMALGAMATION

Date: \_\_\_\_\_

The Registrar  
Apel Capital Registrars Limited  
8, Alhaji Bashorun Street  
Off Norman Williams Crescent S.W. Ikoyi  
Lagos State.

To Whom It May Concern,

Please take this as your authority to consolidate/amalgamate my/our under-mentioned accounts into one account stated in respect of my holding in the company below from the date hereof: **(Please it is compulsory you provide information on all the asterisked items)**

\_\_\_\_\_  
\* Shareholder's Name (In Full)

\_\_\_\_\_  
\*Contact Address

\_\_\_\_\_  
\* City

\_\_\_\_\_  
\* State

\_\_\_\_\_  
\*Shareholder's Account numbers

\_\_\_\_\_  
\*Destination Account Number

\_\_\_\_\_  
\*Mobile phone Number(s)

\_\_\_\_\_  
\*E-mail Address

\_\_\_\_\_  
\*Shareholder's Signature

\_\_\_\_\_  
\* Shareholder's Signature

\_\_\_\_\_  
\*Company's Stamp/ Seal

Tick as applicable	
ABACUS MONEY MARKET FUND	<input type="checkbox"/>
ANINO INT'L PLC	<input type="checkbox"/>
CHAPEL HILL DENHAM MONEY MARKET FUND	<input type="checkbox"/>
FIRST ALUMINUM PLC	<input type="checkbox"/>
INTERLINKED TECHNOLOGIES PLC	<input type="checkbox"/>
INTERNATIONAL BREWERIES PLC	<input type="checkbox"/>
LASACO ASSURANCE PLC	<input type="checkbox"/>
LEAD UNIT TRUST SCHEME	<input type="checkbox"/>
MBA MUTUAL TRUST SCHEME	<input type="checkbox"/>
MASS TELECOM INNOVATION PLC	<input type="checkbox"/>
NCR (NIGERIA) PLC	<input type="checkbox"/>
NEM INSURANCE PLC	<input type="checkbox"/>
PARAMOUNT EQUITY FUND	<input type="checkbox"/>
PHARMA DEKO PLC	<input type="checkbox"/>
THE INITIATES PLC	<input type="checkbox"/>

Please note, if your shares were purchased through a Stockbroker, kindly return this form with your CSCS Processed Transfer Form. In addition, copy of your valid identification material is required as an individual. Note also, for Corporate account (s), the form should be duly Sealed and signed by the current Authorized Signatory (ies) of the company.