

PURCHASE ORDER FORM

Details of Investor

Date: ___ / ___ / ___

PLEASE COMPLETE IN CAPITAL LETTERS

1. CORPORATE APPLICANT		
Company's Name:		
Full Postal Address		
City		State
Daytime Telephone Number		Fax
Incorporation Number		Email
Nature of Business		
Registered Office Address (if different from above)		
Authorised Signatory	Authorised Signatory	Corporate Seal
Designation:	Designation:	
Contact Person (S)		

Value of Cheque / Bank draft
Cheque details- Cheque number
Name of Bank

ARE YOU AN EXISTING UNITHOLDER? Yes No

HOW DID YOU HEAR ABOUT THE CORAL ETHICAL FUND

Newspaper Advert Friend Internet Others (please specify)

INCOME PAYMENTS

Reinvest in the Fund Issue Cheque in Company's Name

CERTIFICATE WAIVER (please tick preferred option)

Certificate Fund Statement

Declaration by Applicant(s)

- I/We have attached a bank draft to Coral Ethical Fund with my/our name, address and daytime telephone number written at the back **OR** I/We have evidence of payment **OR** I/We have forwarded evidence of remittance of foreign currency in accordance with the bank details provided overleaf;

- ❑ I/We agree that if these units are redeemed within 3 months of the date of purchase, the fund manager shall deduct a handling charge equivalent to 2% of the redemption proceeds.
- ❑ I/We understand that equity (including mutual funds-Coral Ethical Fund) prices fluctuate and losses in the value of my/our investment may occur and that past performance is not necessarily an indication of future performance

Application Checklist

- ❑ This completed and signed purchase order form
- ❑ A Bank draft or evidence of payment
- ❑ For Applicants investing over ₦5 million and above
 - 1 passport photograph of the signatories
 - 1 proof of identity of the signatories (International passport, Drivers license etc)
 - 1 proof of address of the applicant

NOTE:

- ❑ Minimum initial investment amount is ₦50,000.00
- ❑ Units of the funds will be purchased at the ruling offer price on the date value is received for the investor's bank draft.

FOR FUND MANAGER'S USE ONLY

Amount Paid	Offer Price	Number of Units Allotted

Date Processed _____

Processed By _____



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