

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 GROWTH 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 Growth 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 Growth 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.
- Foreign currency subscribers are advised to contact The Coral Help Desk, FSDH Asset Management Limited for the applicable US dollar exchange rate on the day the remittance is being effected:
 - Telephone: +234(1) 2704884-5
 - Fax: +234(1) 2640173-4
 - E-mail: coralfunds@fsdh-ltd.com
 - Payment can be made in US dollars, for credit to:
 - Account Name: Stanbic Bank Nigeria Limited
 - Account Number: 04433874
 - Bank Name: Deutsche Bank Trust Co. Americas
Bank Address: 1 Bankers Trust Plaza
130 Liberty Street
NY 10015
 - For Further Credit to: (Coral Growth Fund/name of investor)
 - The transferring Bank should request that the Receiving Bank advise Stanbic Bank Nigeria Limited of the payment by SWIFT and quote full details of the transfer i.e. full name and address of the transferor

FOR FUND MANAGER'S USE ONLY

| Amount Paid | Offer Price | Number of Units Allotted |
|-------------|-------------|--------------------------|
| | | |

Date Processed _____

Processed By _____



Niger House (6th Floor) 1/5 Odunlami Street, P.M.B. 12913, Lagos, Nigeria. RC. 434206
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Telephone: 09-6700535