

ZENITH FUNDS

(Authorized and Registered in Nigeria as a Unit Trust Scheme)

PURCHASE ORDER FORM

EQUITY FUND

INCOME FUND

ETHICAL FUND

(Please Tick as Appropriate)

NOTE: If you wish to purchase Units of the Zenith Mutual Funds for a child under 18 years, please write the child's full name and date of birth in the space provided below, otherwise leave blank.

Executing Zenith F			pli	catio			confi									ınd	ac	cep	tar	ice	of th	ne te	erm	s of	the				
X7 1 CTT .	11	1.0	_		, , , , , , , , , , , , , , , , , , ,			MIT I	, , , , , ,	- 11 Y	JAF	11/	LLE	. IL	ZW.		_											Walter	
Value of Units app																e,							6	Date	e:	_/_		/20_	
CORPORATE APPL	ICA	NT	4	Tr.	1	0	r	10:	1	,	ı	F	10	r	e e	7	15	7.		6 8					N 2	1			
Company Name		76	10					Vi.																					
Incorporation No.								0								31													
Postal Address		Vic.																											
Telephone No.		N.											100			4								, ,	6 0			0 0	
E-Mail				200	140				100 miles					100		2							e - 2		42 54				
Contact Person	2		S.	10	7	an an	(C	P-	0)	2		i	in.		9	0		g					pa y		7 S	5)		2 3	
Signature Mandat (For Corporate Applic	te cants	340		100 m	797.0		Auth	orise	d Sigi	natory	/					(Согр	orat	e S	eal	,	Ş.							
Title		Mr.	- 124			[rs.		No.	M			С	ther	S			3	18		1)		Ĉ.	1.		8) (5)	Î		8) (1)	
Surname				Ì		i i i i i i i i i i i i i i i i i i i				0						1									Sign	ature	/Thi	ımbpr	int
First name				80	8		88			8 - 3			61				8.	- 8							~.8.		,		
Other names												0	23				0.	- 19							74 84				
Full postal address			3		V4 0													04											
Telephone no.			53.				(2			27 - 2		18		4 .	D	ate	of	 Birt	h	8 :			4					9	
Email			5						9)	0 3																1			
Child's Surname			Ĩ	Ť									Fi	rst N	Vam	e		100								Ť			
Other Names		65	3						35				26 mm	ate c	and a contract of	0000		- 13											3
SECOND JOINT AP	PLI	CANT	(IF	АРР	LICA	RLI	E																						
Title		Mr.			93.0	Ars.			Mis	35		C	ther	3			3			0									
Surname		0.5				2.4		23	2				5.5					7							Sign	ature	/Thi	ımbpr	int
First name																									8:				
Other names																									20	795	· ·		,
Signature Mandate (for Joint A	Applic	ants only)		r	13:		T .	74.5	T	13		Te		D	ate o	of E	Birtl	n											
Email																													
Next of Kin	5		(b)		(5)			10		3		10	ar				8	(8)		1			1		(8)			6)	
Relationship													10															. 39	
Address of Next of l	xin (if differe	nt fro	m appli	cant)	5.5		23																				5 5.5 C1 6.5	
Investors Mother's n	naic	len na	me			51		22		50 S			5.5				23	5		5					2 19			55 50	

Certificate Type		Physical	Elec	tronic (To be	deliv	ivered to Email)										
Payment Mode		Cheque	Tran	ısfer		Direct Debit										
Statement Delivery	Option	Postal	Address	(Po	oint Of Submissi	on									
Age Range	<	18 18	3 - 39	< 60	1,:	> 60										
Income Distribution		Re-Invest	In The Fu	nd	Iss	Issue A Cheque In My Name										
Occupation	Teleco	mmunication		Services		Oil &	Legal		Real Estate							
	Engine	eering	Banking & Finance			Others (Pls Sp	ecify)									
How Did You Hear	About	Corporate	Pitch	Friend	1	Internet	Othe	Others (Pls Specify)								
Declaration by Applicant(s) I/We have attached a bank draft to purchase units in Zenith Mutual Funds with my/our name, address and daytime telephone number written at the back OR I/We have evidence of payment; 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 (including Zenith Mutual Funds) equivalent to 1% of the redemption proceeds. I/We understand that equity 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 I/We have attached copies of the following: 1 proof of identity of the applicant/each signatory 1 proof of address of the applicant/each signatory (International passport, Drivers license etc) 2 proof of address of the applicant/each signatory 3 CAC certified copy of Certificate of Incorporation (corporate applicants only)																
 Copy of CAC Form CO7 (corporate applicants only) Copy of CAC Form CO2 (corporate applicants only) Board resolution (corporate applicant only) NOTE: Minimum initial investment amount is \$\text{\t																

Amount Paid	Offer Price	Number of Units Allotted
Relationship Officer	Branch	Account Number
Date Processed:		
Processed By:		Approved by: