

NTHC REGISTRARS Kindly attach a copy of ID

SHARE PARTICULARS

Name of Share (s)

Certificate Number (s)

AFFIX
PASSPORT
PICTURE
HERE

SHAREHOLDER PARTICULARS

Surname

First Name

Other Names

Title

Gender Male Female

Date of birth

Type of ID

ID Number

SHAREHOLDER COMMUNICATION DETAILS

Postal Address

Current

Previous

Residential

Mobile Number

Telephone(*residence*)

Telephone(*office*)

Email

WOULD YOU LIKE TO RECEIVE DIVIDEND THROUGH YOUR BANK? Yes No

I hereby mandate the Registrar to forward my dividend to :

Name of Bank

Branch

Address of Bank

Account Number

Account Name

Signature 1

Signature 2

Date

FOR OFFICE USE ONLY

Received By

Date of Receipt

Updated By

Date of Update

Checklist for Update Name Signature
 Address Bank Details