

SUNU ASSURANCES NIGERIA PLC AND ITS SUBSIDIARY COMPANIES

E-DIVIDEND & CHANGE OF ADDRESS FORM

TO:
The Managing Director
EDC Registrars Limited,
23, Oluwole Idowu Street,
Ilupeju, Lagos.
Tel: +234 704 372 1311, +234 414 538 6714
website: www.edcregistrars.com.ng

I/we hereby request that from now on, all dividends due or which may be due to me/us from my/our holding in SUNU Assurances Nigeria Plc be paid to:

(Surname) _____ (Middle Name) _____ (First Name) _____

Shareholder's Full Address: _____

Signature/Right Thumbprint of Shareholder: _____

Mobile No(s): _____

Name of Bank: _____

Bank Branch: _____

Bank Branch Address: _____

Bank Account Number: _____

Joint Holders' Signatures: (1) _____

(2) _____

Corporate Shareholders

Authorised Signatories: (1) _____

(2) _____

Company Seal (required for Corporate Shareholder)

Bank's Authorised Signatories and Bank Stamp: _____

CHANGE OF ADDRESS FORM

I/we hereby request that my/our address be changed as follows:

Old Address: _____

New Address: _____

Account Number: _____

Name of Stock/Shareholder: _____

Signature of Stock/Shareholder: _____