

INDEMNITY FORM

PLEASE COMPLETE THIS FORM LEGIBLY IN CAPITAL LETTERS

Α	PERSONAL DETAILS Fill your name as it a	ILS t appears on the Certificate		
			Affix	
	FIRST NAME SURNAME		passport	
	ADDRESS			
	ADDRESS			
	E-MAIL			
	TELEPHONE			
	NO OF UNITS			
	BANK			
	ACCOUNT No	BVN BVN		
В	REPLACEMENT/ REDEMPTION REQUEST Tick applicable box			
	I/We request the issue of a purchase statement to replace my/our missing original certificate I/We hereby apply for the redemption of Units of the Halal Fund in the absence of my/our original certificate			
	original certificate.			
C	I/We do solemnly and sincerely declare that I/we am/are the registered holder of units of the Lotus			
	 I/We do solemnly and sincerely declare that I/we am/are the registered holder of Laboration Laboratio			
		identate to deriver the original certificate to the rund Manager for cancenation should the same ever be recovere	u	
D	SIGN HERE Individual Unit Hold	older Joint Unit Holder Joint Unit Holder		
	For Corporate body* Please ensure that your Company Seal is applied and the form is signed by two Directors or one Director and the Company secretary In the presence of Name: Address:			
	Occupation:	ccupation:		
	Date:	. Ÿ		
-	FOR LOTUS CAPITAL USE ONLY Signature Verification: Regular Irregular Differs No of Units			
	Signature Verified by			
	Fund Administrator		(
	Authorised by:	Name Signature		
		DD/MM/YYY	Y	
Lotus Group Data Privacy Policy				

By signing this form, I consent to the processing of my personal data in accordance with the Lotus Group Data Privacy Policy