

# CMF 2028 Application Form.

Application List Opens:  
18<sup>th</sup> June, 2018

**CORDROS MILESTONE FUND 2028**  
OFFER FOR SUBSCRIPTION OF  
**5,000,000 UNITS OF ₦100.00 EACH AT PAR**  
PAYABLE IN FULL ON APPLICATION

Application List Closes:  
27<sup>th</sup> July, 2018

ISSUING HOUSE:  


FUND MANAGER:  


Application must be in accordance with the instructions set out on the back of this application form. Care must be taken to follow these instructions as applications that do not comply may be rejected.

**DECLARATION:**

- I am/We are 18 years of age or above.
- I/We attach the amount payable in full on application for the Units indicated below CORDROS MILESTONE FUND 2028 at ₦100.00 per Unit.
- I/We agree to accept the same or any smaller number of Units than I/We applied for in respect of which allotment may be made upon the terms of the Prospectus dated 17<sup>th</sup> May, 2018.
- I/We understand that we shall receive our allotted Units in either Certificate or E-certificate form.
- I/We authorise you to send a Certificate and/or cheque, for any amount overpaid or rejected, by registered post at my/our risk to the address given below.
- I/We hereby declare that I/We have read the Offer Prospectus dated 17<sup>th</sup> May, 2018 issued by the Issuing House on behalf of the Fund Manager

GUIDE TO APPLICATION	
Number of Units applied for	Amount Payable
25 Minimum	₦2,500.00
Subsequent multiples of 10	₦1,000.00

DATE:  /  /

Number of Units Applied for:

Value of Units Applied for/Amount Paid:

**PLEASE COMPLETE IN BLOCK LETTERS AND IN BLACK INK**

**1. INDIVIDUAL/CORPORATE APPLICANT**

Title:  MR.  MRS.  MISS  DR.

Surname /Company Name:

Other Names (for Individual Applicant only):

Full Postal Address:

City

State

Land Phone Number

Mobile (GSM) Phone Number:

Email Address:

Next of Kin:

Clearing House Number (CHN):

Name of Your Stockbroker:

**2. JOINT APPLICANT**

Title:  MR.  MRS.  MISS  DR.

Surname /Company Name:

**3. INCOME DISTRIBUTION**

Please tick in the box to indicate preferred option – CASH  REINVESTMENT

Other Names:



**4. BANK DETAILS (FOR e-DIVIDEND/DISTRIBUTION)**

Bank Name:

BVN:

Branch Name:

Account Number:

Signature or Thumbprint	Signature or Thumbprint	Company Seal & Incorporation Number (Corporate Applicant) <input type="text"/>
 Plot 2, Abebe Village Road Iganmu, Lagos. 234-1-2701078	 Stamp of Receiving Agent	Control Number: <input type="text"/>