



SOVEREIGN SUKUK SUBSCRIPTION FORM - UP TO N250 BILLION 7-YEAR IJARAH SUKUK
DUE 2028 ON BEHALF OF THE FEDERAL GOVERNMENT OF NIGERIA

Applications must be made 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 with the instructions may be rejected. Please consult your Financial or Legal Advisers for guidance before completing this Form

In response to the advertisement in both print and electronic media, I/We hereby offer my/our subscription for FGN Sukuk

A	Guide to Application	Date: 1 4 1 2 2 0 2 1	E-allotment Details
	Minimum Value: ₦ 10,000.00 Multiple thereafter: ₦ 1,000.00	Value of Sukuk Applied for in ₦ 750,000.00	Applicant's S4/Custodian A/C No. <div></div> Applicant's CSCC A/C No. <div></div> Applicant's Clearing House No. (CHN) <div></div>
B	Amount in Words SEVEN HUNDRED AND FIFTY THOUSAND NAIRA ONLY		

1. Individual Applicants (to be completed in block letters)

2. Joint Applicants (to be completed in block letters)

Full Name (Surname first) MISS. OSUJI CHINENYE MIRIAM	Full Name (Surname first)
(State titles if any e.g. Mr. Mrs. Miss)	(State titles if any e.g. Mr. Mrs. Miss)
Occupation	Occupation
Phone No.: 0 7 0 3 2 9 0 3 4 9 1	Phone No.: <div></div>
Address 5, NWOBI STREET, BUCKNOR ESTATE, EJIGBO	Address
Passport/Driving License/National ID No:	Passport/Driving License/National ID No:
Date of Birth 2001-11-14 Mother's Maiden Name	Date of Birth Mother's Maiden Name
Email Address MEETWITMIMI@YAHOO.COM	Email Address
Next of Kin:	Next of Kin:
Name of Bank LOTUS BANK LIMITED	Name of Bank
Bank Account No.: 1 0 0 0 0 0 1 4 1 2	Bank Account No.: <div></div>
BVN: 1 2 3 4 5 6 7 8 9 1 0	BVN: <div></div>
(*Must be completed) For rental payment purpose	(*Must be completed) For rental payment purpose
Date: 14/12/2021	Date:
Residency classification of Applicant (tick the Appropriate box) Resident <input checked="" type="checkbox"/> Non-Resident <input type="checkbox"/>	Residency classification of Applicant (tick the Appropriate box) Resident <input type="checkbox"/> Non-Resident <input type="checkbox"/>

3. Corporate Applicants (to be completed in block letters)

Company Name

Type of Business R/C No:

Address

Email Address

Contact Person:

Phone No.:

Name of Bank

Bank Account No.:

BVN:

C **Thumb print of illiterate applicant**

Witness:

I.....have given detailed explanation to this applicant in the language understood by him and consequently the applicant has a clear understanding of the transaction he/she has entered into.

Signature:

D	Financial Adviser
NAME:	
CODE:	
OFFICE USE ONLY	
Stamp of Financial Adviser/ Placement Agent	Amount Applied for (N)
	Amount Allotted (N)

E	Investor Category of Applicant (tick the appropriate box)
<input checked="" type="checkbox"/> Individual	
Corporate	
Institutional	
Foreign Investor	
Please affix company seal and write RC Number	

DECLARATION AND SIGNATURE

I, **MISS. OSUJI CHINENYE MIRIAM**, declare that the information I have given in this application is truthful, complete and correct.

I understand that any error in completing the application form may result in the rejection of my application. I agree that any false information or misrepresentation may constitute an offence under applicable laws in Nigeria

I agree that by checking the signature box below, I have electronically signed my application. I absolve the Issuer and its advisers of any defect or liability arising from this electronic superscription hereof

☒ I AGREED AND SIGNED

LOTUS FINANCIAL SERVICES LIMITED
1B, Udi Street Osborne Foreshore
Estate Ikoyi Lagos