

MUTUAL FUNDS ADDITIONAL SUBSCRIPTION FORM

Please note that CASH is not an acceptable mode of payr	nent	*DATE DAY MONTH YEAR
*ACCOUNT NAME		
*BANK VERIFICATION NUMBER (BVN)		
*MOBILE NUMBER		
*E-ACCOUNT NUMBER	*AMOUNT	*TYPE OF FUND (e.g. SIMM, SIGIF, SINEF, SIBAL,SIMAAN, SIBOND, etc)
	(N) (N)	
	(N) (N)	
	(N)	
*MODE OF PAYMENT CHEQUE/ BANK DRA	AFT FUND TRANSFER *PAYMENT DATE DAY	MONTH YEAR
DECLARATION: I/We have read, understand & confirm that as with all capital market investments, the prices of funds invested in quoted securities (i.e. StanbicIBTC Nigerian Equity Fund, StanbicIBTC Ethical Fund, StanbicIBTC Imaan Fund, StanbicIBTC Bond Fund) may fluctuate and that past performances is not necessarily an ndication of future performance. I/We agree to comply with the minimum tenor(s) of the investment as advised, failing which I accept any loss, cost and charges that may arise as a result of my redemption.		
*SIGNATURE OF UNIT HOLDER	gnature/ Date Sig	nature /Date
All Fields with asterisks () are mandatory		
FOR OFFICIAL USE ONLY		1
Amount Paid	Offer Price	Number of Units Allocated