

DIVIDEND/RETURN MONEY REVALIDATION FORM

Company: _____

I/We, the undersigned, _____

do hereby request for the revalidation of my/our stale Dividend warrant/Return money draft valued for NGN _____

SHAREHOLDER'S DETAILS

Name _____

Address _____

_____	Tel No. _____
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E-mail Address: _____	Tel (Mobile): _____
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Signature _____

FOR REGISTRAR'S USE ONLY

Confirmed outstanding by _____

Authorised for revalidation by _____

Kindly return the duly completed form to the Registrar, United Securities Limited at the address stated below

United Securities Limited, RC 126257

10, Amodu Ojikutu Street, Victoria Island, P.M.B 12753 Lagos, Nigeria. Tel: +234 (1) 271-4566, 271-4567

Website: www.unitedsecuritieslimited.com; Email: info@unitedsecuritieslimited.com

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