

# SHAREHOLDER'S DETAILS FORM



PRIMA  
Reinsurance Plc

**PRIMA  
REINSURANCE PLC**

Date:	
Broker's Account No.	
NRC or Passport # or Co. Reg. #	
Title: Mr. / Mrs. / Ms / Miss / Dr. / Others	
Surname	
First Name / Other Names	
Date of Birth	
TPIN	
Physical Address	
Postal Address / ZIP Code	
Town	
Country	
Email Address	
Contact Numbers	Mobile: Landline: Fax:
No. of Shares	

Bank Name	
Branch	
Bank Address	
*Bank Account Number (DDAC Format)	*Branch Sort Code
IBAN	Swift Code
Currency	
Bank Account Holder Name	Shareholder's Signature:

*\*Please note that your Bank Account Number and Branch Sort Code must conform to the DDAC Format; consult your Bankers for the correct format.*



**ShareTrack**  
ZAMBIA

SHARE TRANSFER AGENTS AND  
SHAREHOLDER MANAGEMENT SERVICES

## Shareholder Service Centre

### Spectrum House

Stand No. 10, Jesmondene, Great East Road

P O Box 37283, Lusaka - ZAMBIA

Tel: +260 211 374 791 / 92 / 93

Mobile Fixed Lines: **MTN** +260 96 064 0613; **AIRTEL** +260 77 777 4775

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**ShareTrack Zambia - Tracking Your Shares**