

# SHAREHOLDER'S DETAILS FORM



**ZAMBIA  
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.*

<p><b>ShareTrack</b> ZAMBIA</p>	<p><b>Shareholder Service Centre</b></p> <p><b>Spectrum House</b> Stand No. 10, Jesmondene, Great East Road P O Box 37283, Lusaka - ZAMBIA Tel: +260 211 374 791 / 92 / 93 Mobile Fixed Lines: <b>MTN</b> +260 96 064 0613; <b>AIRTEL</b> +260 77 777 4775 E-Mail: sharetrack@scs.co.zm   www.sharetrackzambia.com</p>
	<p>SHARE TRANSFER AGENTS AND SHAREHOLDER MANAGEMENT SERVICES</p>
<p><b>ShareTrack Zambia - Tracking Your Shares</b></p>	