

LA COMMUNITY BANK LIMITED
APPLICATION FORM ADDITIONAL SHARES

A. DETAILS OF APPLICANT

APPLICATION FORM NUMBER

1. Date of Application.....

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2. Full Name of Applicant (Surname First).....

(Title: Mr./Mrs./Miss/Dr./Rev)

Resident in Ghana

☐

Ghanaian Resident overseas

☐

3. Name of Minor (if applying on behalf of
Minor).....

4. Nationality..... Residential Address.....

5. Postal Address Telephone No.....

6. Number of Shares Owned Value of Shares (GH¢).....

7. Bankers Account No.....

8. Select payment mode

☐

Cash

☐

Cheque

☐

Payment Order

☐

Western Union

☐

Swift Transfer

9. Signature/Thumbprint of Applicant.....

B. FOR OFFICE USE ONLY

No. of Shares Allocated	Amount (GH¢)	Refund (GH¢)

Approved by:

Approved by:

Name..... Name.....

Signature..... Signature.....

C. TO BE COMPLETED BY RECEIVING OFFICIAL, SIGNED AND RETAINED BY APPLICANT AS EVIDENCE OF PAYMENT

3. No. of shares AppliedCounterfoil Form No.

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4. Amount Paid (GH¢)

5. Name (Surname)

6. Other Names

7. Postal Address

8. Residential Address

9. Nationality

Applicant's Sign. / Thumbprint	Bank Stamp & Sign.