

MUTUAL FUNDS SUBSCRIPTION FORM (INDIVIDUAL)



MUTUAL FUNDS INVESTMENT OPTIONS

Mutual Funds	Date:	
AIICO Money Market Fund (AMMF) NGN (₦)	Who introduced You?	
AIICO Balanced Fund (ABF) NGN (₦)		
AIICO Eurobond Fund (ABF) NGN (\$)		

Are you an existing investor?
Yes ☐ No ☐

I am a minor
Yes ☐ No ☐

Do you want your interest re invested?
Yes ☐ No ☐

PERSONAL INFORMATION

Title: Mr. ☐ Mrs. ☐ Others:

Gender: Male ☐ Female ☐

Full Name of Individual Surname First name Other name

Full Name of Joint Applicant (if applicable) Surname First name Other name

Residential/Corporate Address:

Mobile Phone Numbers: OR

Email Address:

Date of Birth

Nationality

Place of Birth

State of Origin

Mother's Maiden Name

ID Type

ID Number

Issue Date:

Expiry Date:

Next of Kin Surname First name Other name

Next of Kin Phone No. Relationship with Next of Kin

Email Address of Next of Kin

Employment Status Employed ☐ Self Employed ☐ Retired ☐ Unemployed ☐ Student ☐

Employer's Name

Employer's Address

Employer's Phone Number

Source of Funds

*Politically Exposed Person (PEP) Yes ☐ No ☐

If Yes, Please Provide Details

PERSONAL ACCOUNT DETAILS

Account Name:

Bank Name:

Account No:

BVN

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SIGNATURE MANDATE (Corporate applicants must provide the signature mandates for all the signatures)

Signature of Individual / Joint Applicant (First Signatory)	Signature of Joint Applicant (Second Signatory)	☐ Either to Sign OR ☐ Both to Sign

MUTUAL FUNDS PAYMENT DETAILS

Investment Option	Minimum Initial Investment Amount	Minimum Additional Investment Amount	Minimum Holding Investment Period	Account Name	Bank Account Number
AIICO Money Market Fund (AMMF)	₦ 10,000	₦ 5,000	90 Days	UBA Trustees/ AIICO Money Market Fund	1018218102
AIICO Balanced Fund (ABF)	₦ 50,000	₦ 10,000	90 Days	UBA Trustees/ AIICO Balanced Fund	1018820709
AIICO Eurobond Fund (ABF)	\$ 1,000	\$ 500	180 Days	VETIVA Trustees/ AIICO Eurobond	RMB 1000162184

Units of the chosen fund(s) will be purchased at the prevailing offer price, on the day the completed subscription form, KYC and payment or evidence of payment are received. Note that all payments shall either be deposited or transferred into the Fund account provided above, before 12:00am. Inflows received after 12:00am will be given value at the next business day.

EMAIL INDEMNITY

I/We the undersigned with Account Number and Email Address being a client of AIICO Capital Investment Managers Ltd hereby authorize to effect any and all transaction relating held with them on the basis of my electronic mail (Email).

I/We consent to indemnify AIICO Capital Investment Managers Ltd against any losses whatsoever suffered by myself/ourselves or AIICO Capital Investment Managers Ltd as a result of AIICO Capital Investment Managers Ltd acting on the basis of the stated email.

I/We further consent that should I/We or AIICO Capital Investment Managers Ltd suffer any loss as more fully enumerated above: I/We shall be liable for the full amount of such loss.

I/We hereby consent that the provided e-mail will be my/our preferred means of communication and that I/We will always notify AIICO Capital Investment Managers Ltd of any change in the email as earlier provided through a duly executed letter based on my/our signature mandate.

Signed this day of 20

Authorized Signatory	Authorized Signatory

DECLARATION

I/We hereby confirm that all the information herein stated are true and guarantees that I can be held responsible for any false declaration.

Signature & Date	Signature & Date

TERMS AND CONDITIONS

The Terms and Conditions set forth below shall be binding on the Account holder(s):

The Client agrees that his/her instruction is subject to the Rules and Regulations of the Securities and Exchange Commission (SEC) and The Investment and Securities Act 2025 and all other relevant Rules and Regulations covering the operations of Capital Market Operators.

The Client agrees that all his/her transactions will be subject to all relevant Anti-Money Laundering Laws and Regulations.

The Client agrees that payments of proceeds of investments from his/her account shall be made ONLY to the Client.

The Client agrees to notify AIICO Capital Investment Managers Ltd immediately, of any change in the details provided to the Company or at the request of the Company, update his/her records.

I/We attest that all information provided herein is accurate and a true representation of my present status. I/We hereby state that the funds and source of such funds are legitimate and not directly or indirectly the proceeds of any unlawful activity

Signature/Date

Signature/Date

For Joint Account: Signature Mandate (Signing rule)

KYC APPLICATION CHECKLIST

- ☐ *Duly completed subscription form
- ☐ *Recent Passport pohotograph of each signatory
- ☐ *Proof of address e.g. utility bill not older than 3 months
- ☐ *Valid means of identification of Individual/Joint e.g NIN, Drivers License, Voters’ card, International Passport, e.t.c.
- ☐ *Birth Certificate (For minors only)
- ☐ *Resident Permit (Foreigners Only)
- ☐ *Email Idemnity

INTERNAL USE ONLY

Risk Profile:

Low Risk☐

Medium Risk☐

High Risk☐

Client’s File Number:

Introduced By:

Product Code:

Account Received By:

NAME:SIGNATURE:DATE:

Approved By:

Compliance Officer: