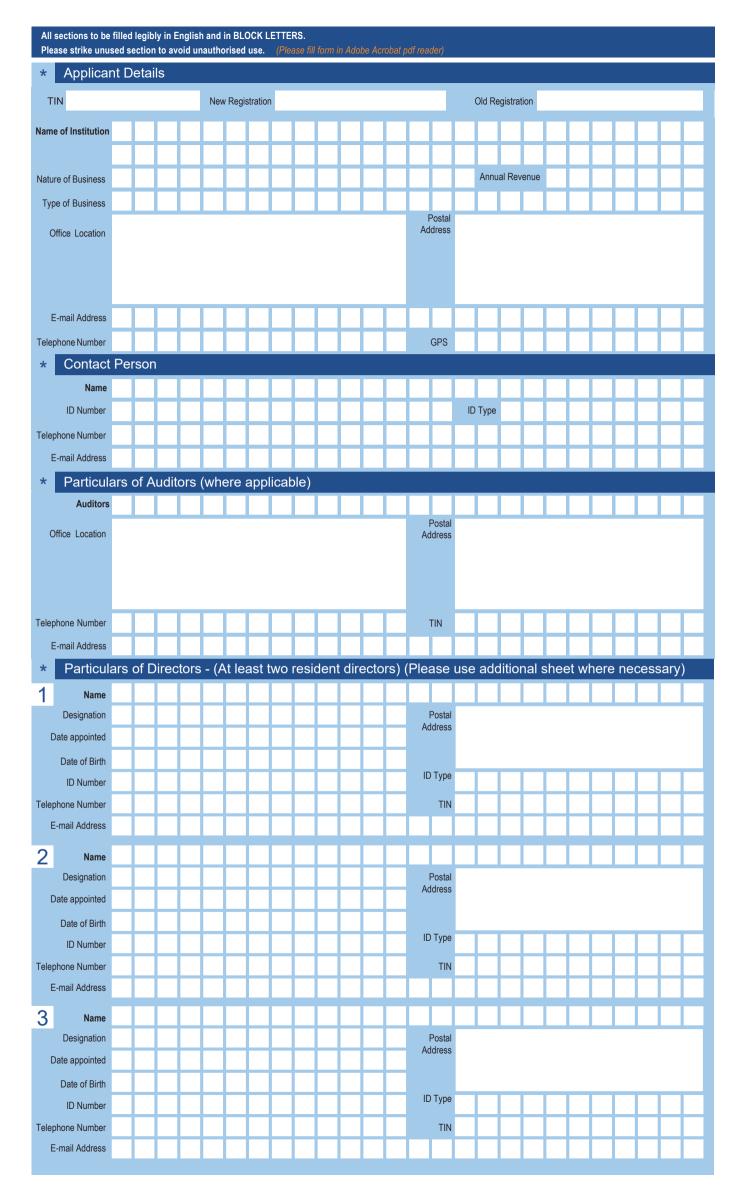


## INSTITUTIONAL ACCOUNT OPENING

Tesah Capital Limited 2nd Floor, Allied Heights 10 Olusegun Obasanjo Highway Abelenkpe-Accra. Tel: +233 302 977813, +233 302 977471 E-mail: info@tesahcapital.com



*	Particula	ars of	Sha	areho	bidei	rs (w	nere	e app	olicat	ole, a	at lea	ast 1	0%3	Shar	eholding	. Ple	ase ι	lse a	additi	ona	I she	eet w	/here	e nec	ess	ary)
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*	* Authorized Signatories - (Please use extra signature cards where necessary)								
1.	Name		2. Name						
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3.	Name		4. Name						
	Designation		Designation						
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	Date		Date						
*	Signature N	Mandate							
	Any to sign	Any two to sign	All to sign						

## For Official Use Only

Requirement Checklist								
S/N	Documents Required. Originals of all documents MUST be seen	Checked	Deferred	Waived	N/A			
001	Certificate of Incorporation							
002	Certificate to Commence Business							
003	Company Regulations							
004	Duly Completed Investment Account Opening Form							
005	Recent Passport-Sized Photograph of 2 Directors (Not More Than 3 Months)							
006	Valid Picture ID of 2 Directfors (Voter's ID / Passport / Drivers' License)							

## Account Opening Details

Documents Verified By:	Deferral / Waiver of Document (If Any) Authorized By:
Name	Name
Signature	Signature
Date	Date
Account Opened By:	Account Opening Authorized By:
Name	Name
Signature	Signature
Date	Date
How to fill the Signature section:	Completed form should be emailed to clientservice@tesahcapital.com.

1. Check to ensure you have opened this document with Adobe Reader or PDF Reader.

On the Toolbar (3rd bar from top or on the right), click on 'Fill &Sign'.
Select 'Place Signature'.

4. Choose how you would like to create or upload your signature.

5. Drag the signature into the Signature Box and ensure that it ts in the box and does not touch the lines.

\*Note. Please lock this form before saving or emailing to prevent further editing by others. Confirm all information provided before Form Lock