



GHANA COMMERCIAL BANK LIMITED

Registrar's Department. Head Office, Thorpe Road, P.O.Box 134, Accra, Ghana

Date: _____

To the Directors of _____

CHANGE OF DIVIDEND MANDATE

I request that my Dividend Mandate details be changed on the Register of Members as follow

PARTICULARS OF ACCOUNT	
Folio Number:	Reference Number:

Old Account Number:	New Account Number:
Bank:	Bank:
Branch:	Branch:

All Shareholders should sign as appropriate below	
1st Named Holder:	
Address:	Signature:
2nd Named Holder:	
Address:	Signature:
3rd Named Holder:	
Address:	Signature:
4th Named Holder:	
Address:	Signature:

FOR REGISTRAR'S USE ONLY			
Folio Number	Amendment Number	Date	Signature

Note: The exact full name(s) as registered is/are required. It/they can be verified by reference to the Share Certificate, or other such communication from us about this shareholding.