

**HALAL FUND INDEMNITY FORM**

\*Please complete this form legibly in capital letters.

**PERSONAL DETAILS** (Fill your name as it appears on the Certificate)

SURNAME	<input type="text"/>	AFFIX CURRENT PASSPORT PHOTO	
OTHER NAMES	<input type="text"/>		
ADDRESS	<input type="text"/>		
MOBILE NUMBER	<input type="text"/>		
EMAIL ADDRESS	<input type="text"/>		
NO. OF UNITS	<input type="text"/>		
BANK NAME	<input type="text"/>		
BANK ACCOUNT NO.	<input type="text"/>	BVN	<input type="text"/>

**INDEMNITY**

- I/We do solemnly and sincerely declare that I/we am/are the registered holder of  units of the Lotus Capital Halal Investment Fund ("The Fund").
- My/our original certificate has been lost or destroyed. Neither the units nor the certificate thereto has been transferred, charged, lent or deposited or dealt with in any manner whatsoever that affects my/our absolute title thereto.
- In consideration of your issuing a purchase statement/redeeming the above units in the absence of the original certificate, I/we (jointly and severally) hereby covenant to indemnify and forever keep you and The Fund indemnified against any and all claims, actions and demands (and any expenses thereof) which may be made against you or The Fund. I/We undertake to pay on demand, all payments, losses and expenses suffered or incurred by you in consequence of your complying with this request.
- I/We undertake to deliver the original certificate to the Fund Manager for cancellation should the same ever be recovered

**SIGN HERE**

Individual Unit Holder	Joint Unit Holder	Joint Unit Holder
<input type="text"/>	<input type="text"/>	<input type="text"/>



**For Corporate body\***  
Please ensure that your Company Seal is applied and the form is signed by two Directors or one Director and the Company secretary

**In the presence of**

Name:

Address:

Occupation:

Date:

Authorized Signature and  
Stamp of Bank or Insurance  
Company

**FOR LOTUS CAPITAL USE ONLY**

Signature Verification:	Regular <input type="checkbox"/>	Irregular <input type="checkbox"/>	Differs <input type="checkbox"/>	No. of Units	<input type="text"/>
Verified by:	<input type="text"/>	<input type="text"/>	DATE	<input type="text"/>	<input type="text"/>
Authorised by:	<input type="text"/>	<input type="text"/>	DATE	<input type="text"/>	<input type="text"/>