



CAL BROKERS LIMITED

(Licensed Dealing Member of the Ghana Stock Exchange)

APPLICATION FOR THE PURCHASE OF CAL SUPERSAVE

Period of Investment: 91 days 182 days 365 days Client Account Number

Name of Applicant: (Surname) Other names:

National ID/ Passport/ Drivers License/ NHIS/ Voters ID No.....

Postal Address

Residential Address

Nationality. Contact No(s)

Email..... Occupation.....

Source of Income: Personal Savings Salary Inheritance/Gift

Others (please state)

Principal Amount: **GH¢**..... Rate Applicable:

Effective Date:

Account to be debited

Special Instructions.....

I/ We authorize CAL Brokers Ltd to purchase on my/ our behalf the investment detailed above.

I/ We confirm that CAL Brokers would process the investment instruction subject to the availability of sufficient funds to meet the investment.

I/ We confirm that CAL Brokers is not responsible for any information given in this mandate and the mandate is signed on my/ our own freewill.

Unless otherwise instructed, CAL Brokers would Roll Over the proceeds upon maturity. Instructions to stop Roll Over will be executed only when such instructions are received not less than five (5) working days prior to the maturity date.

Signature of Applicant(s).....

Date.....