

FULL DEMATERIALIZATION FORM FOR MIGRATION

To: The Registrar DataMax Registrars Limited.

Name of Company: GTBANK MANSARD SEPLAT



2C, Gbagada Expressway,
By Beko Ransome Kuti Park,
Anthony Oke Bus Stop,
P.M.B 10014, Shomolu,
Lagos State.
Tel: 01- 7120008 -11, 0700DATAMAX
Fax: 01- 7120012
E-Mail: datamax@datamaxregistrars.com
Web: www.datamaxregistrars.com

Instruction: Please fill out the form in CAPITAL LETTERS

Section 'B' is applicable only if certificate(s) is/are misplaced, lost or destroyed.

Please credit my account at Central Securities Clearing System (CSCS) with shares from my holdings in the company stated below. I recognize this will invalidate any certificate(s) in my possession, or which might come into my possession in respect of my total holding(s) in this/this company.

SECTION A:

SHAREHOLDER'S FULL NAMES: _____

(Surname) First Name, Middle Name

Address: _____

GSM Numbers: _____ Registrar's Id No (RIN): _____

CSCS Investor's Acct Number: _____ Clearing House Number(CHN): _____

Bank Name: _____ Bank Account Name: _____

BVN: _____ Bank Account No (NUBAN): _____ Email Add: _____

Name Of Stockbroker: _____ Stockbroker's Code BANCO



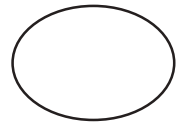
BANCORP SECURITIES LIMITED

Authorized signature and stamp of stockbroker



Shareholder's signature

2nd signature (if applicable)



Thumb Print

CERTIFICATE DETAILS

S/N	CERTIFICATE NO. (IF ANY)	UNITS

S/N	CERTIFICATE NO. (IF ANY)	UNITS



SECTION B: INDEMNITY FOR MISPLACED, LOST OR DESTROYED CERTIFICATE(S)

I/We request the Registrar to credit my/our account at Central Securities Clearing System (CSCS) with unit of shares not covered in my/our share certificate(s) details quoted in Section 'A' above. The holdings are registered in my/our name, and the original shares/stocks certificate(s) has/have been misplaced, lost or destroyed and has not/have not been pledge, sold or otherwise disposed of, or was never received. I/We in consideration hereby covenant to indemnify and forever keep indemnified the security issuer, the directors and trustees of the security issuer, the security registrar, the directors and officers of the security registrar from and against all losses in respect thereof and all claims, actions, proceedings, demands, costs, expenses whatsoever which may be made or brought against them by reason of compliance with this request. I/We further undertake and agree that if the said Certificate(s) shall hereafter be found, to to forthwith deliver up to the Registrars or their successors or assigns without cost, fee or reward.

S/N	CERTIFICATE NO. (IF ANY)	UNITS

Dated this _____ Day of _____ 20_____

Name: _____

Signature: _____

Joint (ii) (if applicable): _____

Joint (iii) (if applicable): _____

This form is to be signed by the security holder.

Where the holding is in more than one name, all of the security holders must sign.



In the Presence of:

Name: _____ GSM NO: _____ Signature: _____

Address: 1, DAVIES STREET, OFF MARINA LAGOS

This is to be executed by the Shareholder's Stockbrokers and Banker or Insurance Company.

On behalf of _____ Plc, we hereby join in the above indemnity and undertaking and certify the person(s) who has/have signed this statement is/are known to us and has/have signed in our presence with their normal signature(s) and agree jointly and severally to keep and forever keep indemnified the security issuer, the directors and trustees of the security issuer, the security registrar, the directors and officers of the security registrar from and against all losses in respect thereof and all claims, actions, proceedings, demands, costs, expenses whatsoever which may be made or brought against them by reason of compliance with this request

Authorised Signatory (1): _____

Authorised Signatory (2): _____

