THE APPLICATION FORM

USE BLOCK LETTERS

1. Form Number:	Advisor's Signature & Stamp	
Receiving Agent/Branch Code:		
Date:		Signature/Thumbprint (above the line)

2.	Surname/Company name:	3. Number of Shares:	
	Forename(s) in full:	Amount Payable (Ghanaian Residents) ¢:	
	State title if any, or Mr./Mrs./Ms./Alhaji/Dr. etc.		
	Minor's Name: (If applying on behalf of a minor):	Amount Payable (Foreign Residents) £/$:	

Applicant's Address Details:		**Dividend Payment details:**	
4.	House No./Street:	5. Name of Bank:	
P. O. Box Tel:		Branch:	
Town:		Branch Code:	Verify from Receiving Agent
Region:		Account Number:	
Country:		Account Name:	

6. Nationality: Ghanaian ☐ other ECOWAS ☐ other ☐	COUNTRY OF RESIDENCE:

7. Declaration:
I/We hereby apply for offer Shares on the terms and conditions set out in the Prospectus. I/We declare that I/we am/are a Qualifying Offer Applicant(s) and that to my/our knowledge there is no other application being made for my/our benefit (or that of any person for whose benefit) I/We am/are applying for "TRANSOL" Shares for which I/we have applied on this form. I/we understand the caution in Note 7 of the Completion Guide.

8. Joint Applicants: I/We join in this application and give the Declaration in Box 7 above DATE:

Other Applicants	2nd Joint Applicant •	3rd Joint Applicant	4th Joint Applicant
Surname: (Mr./Mrs./Ms./Alhaji/ Dr., etc.)			
Forename(s) in full:			
Signature Or Thumbprint			

To be completed by receiving Broker/Bank and then signed by the applicant and retained by applicant as evidence of payment

TRANSACTION SOLUTIONS (GHANA) LIMITED SHARE OFFER: COUNTERFOIL Form Number:

Surname/Organisation:		Applicant's Signature/Thumbprint	Advisor's Signature & Stamp
Forename(s) in full:			Databank Brokerage Ltd. HEAD OFFICE 61 Barnes Road, Adabraka P. M. B. Ministries Post Office Accra, Ghana
Title (Mr./Mrs./Ms./Alhaji/Dr., etc):			
Address (Hse. No./Street)			
P. O. Box:	Town:		
Region:			
Country:			
NUMBER OF SHARES:		Amount Paid (¢/$/£):	Agent Code: