

SPECIMEN SIGNATURES

Account Number

Account Name

Surname

First Name


Other Name

Telephone Number Fax

1. Name of Signatory

Signature Category

Mobile Phone No



2. Name of Signatory

Signature Category


Mobile Phone No



3. Name of Signatory

Signature Category

Mobile Phone No



Authority to Sign _____

CUSTOMER SERVICE OFFICER	HEAD OF OPERATION
<p>ACCOUNT OPENED BY: _____</p> <p>NAME: _____</p> <p>_____ SIGNATURE/DATE</p>	<p>APPROVED BY: _____</p> <p>NAME: _____</p> <p>_____ SIGNATURE/DATE</p>