OMNI MARCHÉ
SÉCURITÉ AFRICA LIMITED

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13th Floor, 4th Avenue Towers, Bishop Road, Upper Hill, Nairobi. P.O BOX 2151 - 00202, Kenyatta, Nairobi
Office Line: 0709 004 300 / 0724 226 600 Call Centre: 0709 004 330 / 331 / 332 Email:info@omsafrica.co.ke

PAYMENT REQUISITION FORM

MODES OF PAYMENT

☐ **EFT** ☐ **RTGS**

(If Electronic transfer give bank details)

Bank: _____

A/c no.: _____ Branch: _____

I/We do hereby request (amt) Ksh_____being payment of sale proceeds of

☐ Shares ☐ Refund on a/c ☐ Other and Specify _____(tick appropriately)

Client's full Name (as per national ID or Passport) _____

ID or PP No _____

CDSC Account No_____

Email address_____

Mobile Number_____

Counters:

1)_____ **No. Of Shares** _____

2) _____ **No. Of Shares** _____

3) _____ **No. Of Shares** _____

Signature:_____ **Date:** _____

Signature Verified by: Name _____ **Signature:** _____ **Date** _____