

ACCOUNT NO. ....

SELECT FROM THE LISTED FUND PORTFOLIOS

INCOME FUND  
*(Formerly Money Market Fund)*

PRIME INCOME FUND

EQUITY FUND

PRIME EQUITY FUND

BALANCED FUND

PRIME BALANCED FUND

GLOBAL FUND

PLEASE PRINT CLEARLY

SURNAME		FORENAME(S):	<input type="checkbox"/> MR. <input type="checkbox"/> MRS. <input type="checkbox"/> MISS. <input type="checkbox"/> MS.
POSTAL ADDRESS		DATE OF BIRTH ...../...../.....	
PHYSICAL ADDRESS		IDENTITY NO. (NRC/PASSPORT)	
TEL No.	CELL No.	FAX No.	
EMAIL ADDRESS		SEX <input type="checkbox"/> M <input type="checkbox"/> F	
SOURCES OF FUNDS TO BE NIVESTED			
EMPLOYER NAME (IF EMPLOYED)		TYPE OF BUSINESS	
EMPLOYER ADDRESS		POSITION	
SPOUSE'S NAME (IF MARRIED) / NEXT OF KIN		SPOUSE'S OCCUPATION	
MARITAL STATUS <input type="checkbox"/> SINGLE <input type="checkbox"/> MARRIED <input type="checkbox"/> DIVORCED <input type="checkbox"/> WIDOWED	ANNUAL INCOME <input type="checkbox"/> LESS THAN K30,000 <input type="checkbox"/> K30,000 - K50,000 <input type="checkbox"/> K50,000 - K100,000 <input type="checkbox"/> OVER K100,000	NET WORTH <input type="checkbox"/> LESS THAN K500,000 <input type="checkbox"/> K500,000 – K1M <input type="checkbox"/> K1M – K5M <input type="checkbox"/> OVER K5M	

BANKERS NAME	BRANCH
BANK ACCOUNT NUMBER	INFORMATION VERIFIED? <input type="checkbox"/> YES <input type="checkbox"/> NO

PAST INVESTMENT EXPERIENCE <input type="checkbox"/> NONE <input type="checkbox"/> SHARES <input type="checkbox"/> T-BILLS <input type="checkbox"/> BONDS <input type="checkbox"/> UNIT TRUST	INVESTMENT OBJECTIVES <input type="checkbox"/> INCOME <input type="checkbox"/> LONG-TERM GROWTH <input type="checkbox"/> SHORT-TERM GROWTH <input type="checkbox"/> OTHER (SPECIFY) .....	INVESTMENT KNOWLEDGE <input type="checkbox"/> ADVANCED <input type="checkbox"/> GOOD <input type="checkbox"/> FAIR <input type="checkbox"/> POOR
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HOW DID YOU HEAR ABOUT LAURENCE PAUL UNIT TRUSTS? <input type="checkbox"/> ADVERTISING BY OUR FIRM <input type="checkbox"/> DIRECT APPROACH/MARKETING BY OUR FIRM <input type="checkbox"/> REFERRED BY EXISTING CLIENT <input type="checkbox"/> OTHER .....
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I hereby apply for units in the selected Fund(s) of the Laurence Paul Unit Trust and understand that this investment will be subject to the Trust Deed governing Laurence Paul Unit Trusts. I have read and understood the terms and conditions given in the offering document, including limits and methods of withdrawals. I warrant that I have full authority to enter into this transaction. I understand that past performance is not necessarily a guide to the future. The prices of the units may fluctuate and the value cannot be guaranteed-

I confirm that the information given is true and complete and may be relied upon until the undersigned sends written notice of any changes. I authorise you to make any searches or other enquiries in accordance with your normal procedures in connection with this application.

The information obtained by you in this application and in our dealings with you may be stored by Laurence Paul Investment Services Limited and associated companies for assessment and analysis (including market and product analysis), to advise me of products and services and so that you can improve your services to me and other customers and protect our interests.

**“I hereby consent to Laurence Paul Investment Services Limited disclosing my confidential information in accordance with the provisions of the Securities Act [Cap 354] or any statutory modification of re-enactment thereof”**

<b>CLIENTS SIGNATURE</b>	<b>DATE</b>
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FOR OFFICE USE ONLY

PASSPORT SIZE PHOTO ATTACHED	<input type="checkbox"/> YES <input type="checkbox"/> NO
COPY OF ID DOCUMENT ATTACHED	<input type="checkbox"/> YES <input type="checkbox"/> NO
REFERENCE LETTER ATTACHED (FROM BANKERS/LAWYERS)	<input type="checkbox"/> YES <input type="checkbox"/> NO

ACCOUNT OPENED BY	SIGNED	DATE
ACCOUNT AUTHORISED BY	SIGNED	DATE
REGISTERED REPRESENTATIVE	SIGNED	DATE