

Application List Opening Date  
Sep-[.]17

Application List Closing Date  
Sep-[.]17



WEMA BANK PLC

Offer for Subscription

Up to ₦15,000,000,000

270 Days Series 2 Commercial Paper Issue

Issued at a Discount Rate of [.]% (Effective Yield – [.] %)

Orders must be made in accordance with the instructions set out in this document. Care must be taken to follow these instructions as applications that do not comply may be rejected. If you are in doubt, please consult your Stockbroker, Accountant, Banker, Solicitor or any professional adviser for guidance

JOINT LEAD ARRANGERS/DEALERS



RC: 189502



RC: 444999



RC: 61737227

PLACING AGENTS/DEALERS



RC: 600261



RC: 259260

Please complete all relevant sections of this Form USING BLOCK LETTERS WHERE APPLICABLE

PARTICIPANT STATUS (PLEASE TICK <input type="checkbox"/> )		DATE (DD/MM/YYYY)		CONTROL NO. (FOR REGISTRARS' USE ONLY)	
<input type="checkbox"/> Eligible Individual Investors			/	/	2 0 1 7
<input type="checkbox"/> Fund Managers		Declaration			
<input type="checkbox"/> Pension Fund Administrators		<input type="checkbox"/> I/We note that the Issuer and the Issuing Houses are entitled in their absolute discretion to accept or reject this Order.			
<input type="checkbox"/> Insurance Companies		<input type="checkbox"/> I/We confirm I/we have read the Programme Memorandum dated September [.] 2017 and that my/our Order(s) is/are made on the terms set therein.			
<input type="checkbox"/> Investment/Unit Trusts		<input type="checkbox"/> I/We agree to accept the Participation Amount as may be allocated to me/us subject to the terms in the Pricing Supplement.			
<input type="checkbox"/> Multilateral/Bilateral Inst.		<input type="checkbox"/> I/We authorise you to enter my/our name in the Register of Holders as holders of the Commercial Paper Notes that may be allotted to me/us and to register my/our address as given below.			
<input type="checkbox"/> Market Makers		<input type="checkbox"/> I/We hereby irrevocably undertake and confirm my/our Order(s) for Commercial Paper Issue to my/our Participation Amount(s) set out below at the Discount Rate disclosed			
<input type="checkbox"/> Staff Schemes					
<input type="checkbox"/> Trustees/Custodians					
<input type="checkbox"/> Stock-broking Firms					
<input type="checkbox"/> Resident Corporate Investors					
<input type="checkbox"/> Non-Residential Investors					
<input type="checkbox"/> Hedge Funds					

PARTICIPATION DETAILS (INDIVIDUAL/CORPORATE/JOINT) (Please use one box for one alphabet leaving one box blank between first word and second)

All orders must be for a minimum amount of ₦5,000,000 (Five Million Naira) and in multiples of ₦1,000 (One Thousand Naira) thereafter.

SURNAME/CORPORATE NAME			
FIRST NAME (FOR INDIVIDUALS ONLY)		OTHER NAMES (FOR INDIVIDUALS ONLY)	
JOINT APPLICANT'S FIRST NAME (IF APPLICABLE)		OTHER NAMES (FOR JOINT APPLICANT ONLY)	
CONTACT PERSON (FOR CORPORATE APPLICANT)/NEXT OF KIN (FOR INDIVIDUAL APPLICANT)			
ADDRESS IN FULL (PLEASE DO NOT REPEAT APPLICANTS(S) NAME. POST OFFICE BOX NO. ALONE IS NOT SUFFICIENT)			
CITY		STATE	E-MAIL
TEL NO:			

PARTICIPATION AND ALLOTMENT DETAILS

FACE VALUE	
Please credit my/our CSCS Account as detailed below to the extent of the Commercial Paper Notes are allotted	
PARTICIPANT'S CSCS ACCOUNT NO.	CHN (CLEARING HOUSE NUMBER):

BANK DETAILS

BANK NAME	BRANCH
ACCOUNT NO.	CITY/STATE

SIGNATURES

SIGNATURES	2ND SIGNATURE (CORPORATE/JOINT)	OFFICIAL SEAL/RC. NO.
NAME OF AUTHORISED SIGNATORY (Corporate only)	NAME OF SIGNATORY (Corporate/JOINT)	
DESIGNATION (Corporate only)	DESIGNATION (Corporate only)	