

SEM CAPITAL ADVISORS LTD

1ST FLOOR, FIDELITY HOUSE, RING ROAD CENTRAL P.O.BOX CT 2069 CANTONMENTS, ACCRA, GHANA



DIRECT DEBIT AUTHORIZATION FORM

REF#

OIN:59062201512

CUSTOMER DETAILS

SURNAME

OTHER NAME(S)

ADDRESS:

ID NUMBER

MOBILE NUMBER:

EMAIL:

PAYMENT DETAILS

PREMIUMS (GHS):

AMOUNT IN WORDS:

DATE OF FIRST DEDUCTION

DD

MM

YYYY

SUBSEQUENT DEDUCTIONS

DAILY / WEEKLY / MONTHLY / QUARTERLY / YEARLY

(PLEASE UNDERLINE)

DAY OF EVERY DEDUCTION

until further notice in writing / until...../...../20.....

ACCOUNT NUMBER TO BE CREDITED:

- SEM CAPITAL CLIENT A/C
- SEM ALL AFRICA EQUITY FUND ACH A/C
- SEM INCOME FUND ACH A/C
- SEM MONEY PLUS FUND ACH A/C

INSTRUCTION TO BANK

NAME OF BANK:

BRANCH WHERE ACCOUNT IS HELD:

SORT CODE:

TYPE OF ACCOUNT:

CURRENT

SAVINGS

OTHER

BANK ACCOUNT NAME

BANK ACCOUNT NO

I/ WE THE UNDERSIGNED HEREBY AUTHORIZE THE BANK TO DEDUCT MY/OUR MONTHLY PREMIUM FOR MY/OUR INVESTMENT AS INDICATED ABOVE SUBJECT TO THE TERMS AND CONDITIONS PROVIDED BELOW. (SEM CAPITAL MANAGEMENT LTD) IS HEREBY INDEMNIFIED AGAINST ANY CLAIM OR LIABILITY THAT MAY ARISE BUT NOT LIMITED TO MY/OUR PROVIDING THE WRONG BANK DETAILS, POLICY NUMBER, OR ANY OTHER ERROR IN MY/OUR INSTRUCTIONS IN RESPECT OF WHICH (SEM CAPITAL MANAGEMENT LTD) ACTS IN IMPLEMENTING MY/OUR DIRECT DEBIT AUTHORIZATION. I/WE UNDERSTAND THAT THE WITHDRAWALS HEREBY AUTHORISED WILL BE PROCESSED

TERMS AND CONDITIONS:

- The efficiency of the Direct Debit scheme is monitored and protected by all parties involved.
- If an error is made by any of the parties involved, you are guaranteed a full and immediate refund to own bank account by the originator of the error.
- The client can cancel this mandate at any time by writing to (SEM CAPITAL MANAGEMENT LTD) within 30 days in advance of your account being debited.
- (SEM CAPITAL MANAGEMENT LTD) has agreed to advance notice of the amount at least 10 days before the date of first debit. The notice will be provided by electronic means by e-mail and SMS where the customer has provided them

CLIENT SIGNATURE(S) :

DATE

DD

MM

YY

YY

INTERNAL USE ONLY

REVIEWED BY :

DATE

DD

MM

YY

YY