



## (CORPORATE ACCOUNT)

PLEASE COMPLETE IN BLOCK LETTERS & TICK THE BOX TO  
SELECT ANY PRODUCT OF YOUR INTEREST  
WHERE APPROPRIATE

### INVESTMENT INFORMATION

WBA HIGH YIELD  
NOTE

☐

WBA FIXED INCOME NOTE

☐

TREASURY BILL

☐

OTHERS

☐

TENOR(DAYS)

30

☐

60

☐

90

☐

180

☐

365

☐

INVESTMENT VALUE

### INVESTOR TYPE

RETAIL INVESTORS (DOMESTIC)

☐

INSTITUTIONAL INVESTORS (DOMESTIC)

☐

RETAIL INVESTORS (FOREIGN)

☐

INSTITUTIONAL INVESTORS (FOREIGN)

☐

### INVESTMENT ACCOUNT OPENING (CORPORATE)

WBA HIGH YIELD  
NOTE

☐☐☐☐

CAC / RC NUMBER

TYPE OF BUSINESS

COMPANY NAME

ECWA PASTORS FUND

REGISTERED ADDRESS

NO 1 ROAD AVENUE PLATEAU STATE

EMAIL ADDRESS

esws@ecwaportfolio.com

OFFICE LINE / MOBILE NUMBER

09060007992

TAX IDENTIFICATION NUMBER (TIN)

18350373

SIGNATURE & DATE (DD/MM/YYYY)

COUNTRY

NIGERIA

STATE OF ORIGIN

PLATEAU

TOWN/CITY

JOS NORTH

### ACCOUNT SIGNATORY'S (DETAIL 1)

SURNAME

KOLAKOLE

NAME

MOSES

OTHER NAME

OLUWASEUN

RESIDENTIAL / MAILING ADDRESS

WASE CLOSE JOS PLATEAU STATE

NATIONALITY

NIGERIAN

STATE OF ORIGIN

KWARA

DATE OF BIRTH

06

12

19

74

GENDER

M

EMPLOYMENT DETAILS / POSITION HELD

CEO

TOWN/CITY

IFEKODUN

BVN

22179605138

EMAIL ADDRESS

moses.kolawole@ecwaportfolio.com

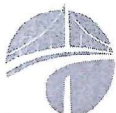
MOBILE NUMBER

08035244324

TAX IDENTIFICATION NUMBER (TIN)

2320563578

SIGNATURE & DATE (DD/MM/YYYY)



## (CORPORATE ACCOUNT)

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### MEANS OF IDENTIFICATION

ID TYPE INTERNATIONAL PASSPORT ID NUMBER A11408394 ID ISSUED DATE 25<sup>th</sup> August 2020  
ID EXPIRY DATE 24<sup>th</sup> August 2025 SIGNATURE & DATE (DD/MM/YYYY) [Signature]

### ACCOUNT SIGNATORY'S (DETAIL 2)

SURNAME YOHANNA NAME RUTH OTHER NAME IBRAHIM  
RESIDENTIAL / MAILING ADDRESS MIANGO JUNCTION RUKUBA ROAD JOS  
NATIONALITY NIGERIAN STATE OF ORIGIN KADUNA DATE OF BIRTH 03 06 1978 GENDER ☐ Male ☒ Female  
EMPLOYMENT DETAILS / POSITION HELD CFO TOWN/CITY KADUNA BVN 22210974919  
EMAIL ADDRESS ruth.yohanna@ecwafortfolio.com MOBILE NUMBER 09060007994  
TAX IDENTIFICATION NUMBER (TIN) 2324107479 SIGNATURE & DATE (DD/MM/YYYY) [Signature]

### MEANS OF IDENTIFICATION

ID TYPE INTERNATIONAL PASSPORT ID NUMBER A12791487 ID ISSUED DATE 4<sup>th</sup> November 2022  
(National ID, Driver's Licence, International passport etc)  
ID EXPIRY DATE 3<sup>rd</sup> November 2027 SIGNATURE & DATE (DD/MM/YYYY) [Signature]

### ACCOUNT SIGNATORY'S (DETAIL 3)

SURNAME JIMOH NAME BOLAKALE OTHER NAME SUNDA Y  
RESIDENTIAL / MAILING ADDRESS ECWA PRODUCTION QUARTERS DAWAKI CLOSE TUDUN WADA JOS  
NATIONALITY NIGERIAN STATE OF ORIGIN KWARA DATE OF BIRTH 02 05 1976 GENDER ☐ Male ☐ Female  
EMPLOYMENT DETAILS / POSITION HELD [Blank] TOWN/CITY SHAG BVN 22326069972  
EMAIL ADDRESS bola.jimoh@empliassets.org MOBILE NUMBER 09060007992  
TAX IDENTIFICATION NUMBER (TIN) 1007993163 SIGNATURE & DATE (DD/MM/YYYY) [Signature]

### MEANS OF IDENTIFICATION

ID TYPE INTERNATIONAL PASSPORT ID NUMBER A11270141 ID ISSUED DATE 31<sup>st</sup> March 2020  
(National ID, Driver's Licence, International passport etc)  
ID EXPIRY DATE 30<sup>th</sup> March 2025

SIGNATURE & DATE (DD/MM/YYYY) [Signature]





## (CORPORATE ACCOUNT)

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### BANK ACCOUNT DETAILS

ACCOUNT NAME ECWA PASTORS FUND ACCOUNT NUMBER 1016903125 BANK NAME ZENITH BANK

### ATTESTATIONS

\* On the first investment, I/we agree that if these units are redeemed within 30, 90 and 180 days of the date of purchase, the fund manager shall deduct a handling charge equivalent to 20% of accrued return.

\* I/we understand that prices fluctuate and losses in the value of my/our investment may occur and the past performances is not necessarily an indication of the future performance

### AUTHENTICATION FOR POLITICALLY EXPOSED AND FINANCIALLY EXPOSED PERSONS

1. Are you currently / ever been a politically exposed person

☐☒

YES

NO

2. Have you currently / ever been a financially exposed person?

☐☐

YES

NO

(PEP) or a relative/close associate of a PEP?

IF YES, PLEASE PROVIDE DETAILS BELOW:

NAME	POSITION HELD	FROM (DD/MM/YYYY)	TO (DD/MM/YYYY)

### INVESTORS AREA OF DOMICILE

NORTH - CENTRAL ZONE

☒

NORTH - EAST ZONE

☐

NORTH - WEST ZONE

☐

SOUTH - EAST ZONE

☐

SOUTH - SOUTH ZONE

☐

SOUTH - WEST ZONE

☐

DIASPORA INVESTORS

☐

### For Official Use Only

ACCOUNT OFFICER	SIGNATURE & DATE	OPERATIONS OFFICER	SIGNATURE & DATE	COMPLIANCE OFFICER	SIGNATURE & DATE

### DOCUMENTAION CHECKLIST

☐ Passport photograph ☐ Recent Utility Bill (Not more than 3 months old) ☐ Valid Means of Identification (National ID, Driver's Licence, International passport etc) ☐ Board Resolution ☐ Copy of CAC Forms (007, 002)

## EMAIL INDEMNITY

PLEASE READ THIS SECTION CAREFULLY. IT PROVIDES YOU WITH IMPORTANT INFORMATION ABOUT YOUR WEALTHBRIDGE ACCOUNT (S)

You hereby consent to the use of electronic communication (which includes but is not limited to written communication by email, SMS, WhatsApp, etc.).

By this consent, you unequivocally agree that instructions transmitted by electronic communication be binding for all purposes, including for purposes of evidence. You irrevocably undertake and warrant that you shall not make any demand or claim or institute any action against WealthBridge Asset Management Limited should you suffer any loss or liability as a result of your consent to the use of electronic communication. You agree to irrevocably indemnify and hold WealthBridge Asset Management Limited harmless against all costs, claims, demands, actions, and proceedings that may be made or instituted against WealthBridge Asset Management Limited; and all liabilities, losses, and damages which may be suffered by WealthBridge Asset Management Limited in connection with, or arising as a result of your consent to electronic communication or WealthBridge Asset Managements' reliance on electronic communication issued from your email account or other electronic communication account indicated herein or subsequently communicated to WealthBridge Asset Management limited by you or your nominated investment adviser or any other person you authorize to manage your account.

You acknowledge that there are certain risks associated with conveying instructions via electronic means, including, but not limited to the risk of delay, non-receipt (due to technical malfunction, disruption, connectivity issues, etc. of your system or WealthBridge Asset Management Limited's system or any other reason), third party interception/interference, data corruption, etc., and hereby fully waive, discharge and indemnify WealthBridge Asset Management in respect of any loss or damages resulting from any of the risks identified above/from the use of electronic communication with respect to your account.

You hereby authorize WealthBridge Asset Management Limited to rely upon and act in accordance with any notice, demand or other communication which may from time to time be, or purport to be, given by email by you or on your behalf by any authorized persons, without inquiry on WealthBridge Asset Management Limited's part as to the authority or identity of the person making or purporting to make such notice or demand from your email account.

WealthBridge Asset Management Limited shall be entitled to treat such notice, demand, or other communication as fully authorized by and binding upon you and shall be entitled to take such steps in connection with or in reliance upon such communication as WealthBridge Asset Management Limited may in good faith consider appropriate.

OFFICIAL EMAIL ADDRESS

md@ecwqportfolio.com / esws@ecwqportfolio.com

COMPANY NAME:

ECWA PASTORS FUND

AUTHORIZED SIGNATORY

\_\_\_\_\_

AUTHORIZED SIGNATORY

\_\_\_\_\_





# INVESTMENT APPLICATION (INDIVIDUAL AND JOINT ACCOUNT)

SELECT ANY OF THE MUTUAL FUND OF YOUR INTEREST WHERE APPROPRIATE

## SIGNATORIES / ACCOUNT MANDATE

PLEASE COMPLETE IN BLOCK LETTERS & TICK THE BOX TO SELECT ANY OF THE MUTUAL FUND OF YOUR INTEREST WHERE APPROPRIATE

ECWA PASTORS FUND

1016903125

ACCOUNT NUMBER

09060007991

TELEPHONE NUMBERS

PORTFOLIO HOUSE KANO ROAD OPPOSITE CHALLENGE BOOKSHOP JOS

REGISTERED ADDRESS

SIGNATORY "A" and ANY OF "B" MUST SIGN

MANDATE (AUTHORISED COMBINATION)

## SIGNATORIES ACCOUNT NAME

SIGNATORY 1

KOLAWOLE MOSES OLUNASEUN

NAME

SPECIMEN SIGNATURE

A

CLASS (A,B,C)

## SIGNATORIES 2 SIGNATORY 1

YOHANNA RUTH IBRAHIM

NAME

SPECIMEN SIGNATURE

B

CLASS (A,B,C)

## SIGNATORIES 3 SIGNATORY 1

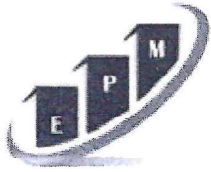
JIMOH BOLAKALE SUNDAY

NAME

SPECIMEN SIGNATURE

B

CLASS (A,B,C)



**ECWA  
PORTFOLIO  
MANAGEMENT  
LIMITED**  
1, Noad Avenue,  
P.O. Box 63, Jos Plateau  
State, Nigeria  
Phone: +2349060007991

**Board of Directors**

**Mr. Ching-yin Tappol**  
Chairman

**Mr Kolawole Moses o.**  
MD/CEO

**Mr. Durodola Moses**  
Member

**Mr. Iliya Gaje**  
Member

**Mr. Edokpa Solomon I.**  
Member

**Mr Dogo Mela**  
Member

**Mr. Duniya Baguro Y.**  
Member

**Amb. Ngbako Ayuba**  
Member

**Barr. Danboyi Joseph**  
Company Secretary

25<sup>th</sup> July, 2024.

**The Manager,**  
Wealthbridge Assets Management,  
21 Bourdilion Road,  
Ikoyi-Lagos.

**BOARD RESOLUTION AND SIGNATURE MANDATE**

At the Board meeting of the Board of Directors of ECWA Portfolio Management Limited held on 13<sup>th</sup> March, 2024, the following resolutions were passed:

1. That an account be opened with Wealthbridge Assets Management in the name of ECWA Pastors Fund

2. That Signatories to the Accounts should be ;

**Kolawole Moses Oluwaseun**

"A"

**Yohanna Ruth Ibrahim**

"B"

**Jimoh Bolakale Sunday**

"B"

3. That the mandate should be, signatory "A" and any of "B" must sign.

**Moses O. Kolawole**  
MD/CEO

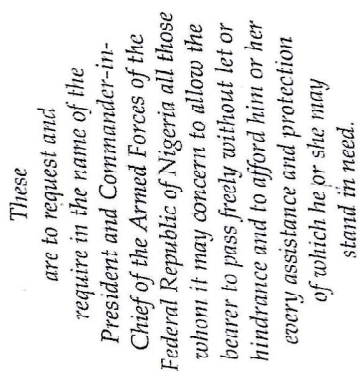
**Solomon I. Edokpa**  
Board Member











**A 11408394**

PASSPORT  
PASSEPORT

Type 1 Type  
P

Country Code / Code du pays  
NGA

Passport No. / Passeport N°  
A11408394

Surname / Nom  
KOLAWOLE

Given Names / Prénoms

MOSES OLUWASEUN

Nationality / Nationalité

NIGERIAN

Date of Birth / Date de naissance

06 DEC / DEC 74

Sex / Sexe M Place of Birth / Lieu de naissance IGBAJA

Date of Issue / Date de délivrance: \_\_\_\_\_

25 AUG / AOÛ 20

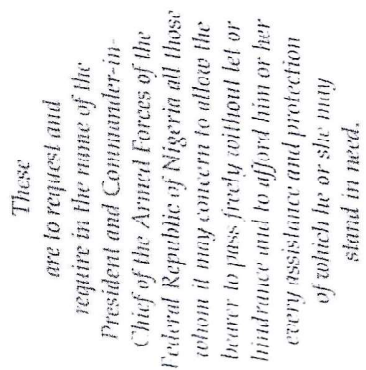
Date of Expiry / Date d'expiration

Personnel No. / N° personnel

Authority / Autorité  
JOS

Holder's Signature / Signature du Titulaire

P<NGAKOLAWOLE<<MOSES<OLUWASEUN<<<<<<<<<<<<  
A114083942NGA7412062M2508245<<<<<<<<<<<<08



A 12791487

PASSPORT  
PASSEPORT



Passport No. / Passport No.

NGA

A12791487

IBRAHIM

Given Names / Prénoms

RUTH YOHANNA

Nationality / Nationalité

NIGERIAN

Date of Birth : Date de naissance

03 JUN / JUN 78

Personal No. / N° personnel

Sex / Sexe Place of Birth / Lieu de naissance

F ZONKWA

Author: *Autentik*

JOS

Date of issue / Date de délivrance: \_\_\_\_\_

04 NOV / NOV 22

Holder's Signature / Signature du Titulaire

Date of Expiry / Date d'expiration:

03 NOV / NOV 27

Reed

P<NGAIBRAHIM<<RUTH<YOHANNA<<<<<<<<<<<<<<<<<<<  
A127914871NGA7806038F2711036<<<<<<<<<<<<<<<00





A 11270141

P<NGAJIMOH<<BOLAKALE<SUNDAY<<<<<<<<<<<<<<<<<<<  
A112701419NGA7605024M250330950471025101<<<48