



SALE ORDER FORM

Customer Name _____ Customer Number _____

Postal Address _____

Telephone: _____

Kindly sell the units listed below on my behalf:

Security	Certificate Number	Quantity	Minimum Price
KWFT CSOP TRUST			

Note:

1. This Sale Order remains valid until it is executed or cancelled in writing, whichever happens first
2. Minimum Price means the price below which the customer is not willing to sell the KWFT CSOP TRUST units
3. Attach a copy of the CSOP Certificate

CUSTOMER'S KWFT BANK ACCOUNT DETAILS:

Account Name: _____ Branch _____

Account Number:

Date: Time: _____

Name: _____ ID/PPT No. _____ Signature: _____

For Official Use Only

<p style="text-align: center;">KWFT</p> <p>Verified by _____</p> <p>Name: _____</p> <p>Signature _____</p> <p>Official stamp _____</p>	<p style="text-align: center;">NCBA</p> <p>Verified by _____</p> <p>Name: _____</p> <p>Signature _____</p> <p>Official stamp _____</p>
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For more details, call KWFT on 0703 067 700 / 0730 167 000 or Email csop@kwftbank.com