

CHANGE IN NEXT OF KIN FORM

Know Your Client (KYC) Application Form							
Client Account No:							

ACCOUNT TYPE							
Individual Joint	Corporate	Trust					
DETAILS OF NEW NEXT OF KIN							
Relationship: Spouse Child Sibling Legal Er	ntity Estate Parent Other	Share: %					
Surname:	First Name:						
Other Name(s):	Gender: Male	Female					
Marital Status: Single Married	Place of Birth:						
Date of Birth: D D M M Y Y Y Y	Nationality:						
Residential Address:							
City / Town:	Digital Address: Ghana Post GPS						
Postal Address:							
Email Address:							
Primary Mobile Contact:							
National ID Number: (Ghana Card only)	Issue Date: D D M M	YYYY					
Place of Issue:	Expiry Date: D D M M	YYYY					
I/we hereby declare that all the information submitted by me/us in this form is correct, true and valid, that by my/our request, to open and maintain Investment Account(s) in my/our name and undertake to notify Bora Capital Advisors of any changes to my/our particulars or information as may be necessary. I/We also declare that we have read thoroughly and understood the contents of this application and have given my/our consent by virtue of my/our signature(s) on this form. I/We consent that investment decisions are my/our prerogative without sole reliance on the investment advice received from Bora Capital Advisors. Bora Capital Advisors accepts no liability for any direct or consequential loss arising from my/our decision. I/We also declare that all debits incurred on my/our Investment account(s) by virtue of my/our trade orders shall be settled by me/us accordingly.							
Name:	Name:						
Signature:	Signature:	v v v v					
Date: FOR INTERNAL USE ONLY:	Date:						
Account Opened By Licensed Officer Approved By Compliance Officer/AMLRO:							
Name of Officer							
Position:	Name of Officer Position:						
· Ostiloni	. osmon						
Signature	Signature:						
Date:	Date: D D M M	YYYY					