## COMMITMENT FORM

**Application List Opening Date**
**19 February 2021**

**ARRANGER**

Stanbic IBTC Capital

**RC: 1031358**

on behalf of

Dufil

**RC: 438802**

**Application List Closing Date**
**26 February 2021**

**Offer for Subscription**

# Up to NGN30,000,000,000.00

## 182 Day Series 3 Commercial Paper Issue

## ISSUED AT A 3.9218% DISCOUNT RATE (4.0000% 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 any doubt, please consult your Stockbroker, Accountant, Banker, Solicitor or any professional adviser for guidance.

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

| PARTICIPANT STATUS (PLEASE TICK ☐) | | DATE (DD/MM/YYYY) | CONTROL NO. (FOR REGISTRARS' USE ONLY) |
|---|---|---|---|
| ☐ | High Net worth Investors | / / 2021 | |
| ☐ | Fund Managers | | |
| ☐ | Pension Fund Administrators | | |
| ☐ | Insurance Companies | | |
| ☐ | Investment/Unit Trusts | | |
| ☐ | Multilateral/Bilateral Inst. | | |
| ☐ | Market Makers | | |
| ☐ | Staff Schemes | | |
| ☐ | Trustees/Custodians | | |
| ☐ | Stock-broking Firms | | |
| ☐ | Resident Corporate Investors | | |
| ☐ | Non-Resident Investors | | |
| ☐ | Hedge Funds | | |

**DECLARATION**

☑ I/We note that the Issuer and Arranger are entitled in their absolute discretion to accept or reject this Order.
☑ I/We confirm that I/we have read the Programme Memorandum dated dated 13 July 2016 and subsequently updated on 23 September 2019 and that my/our Order(s) is/are made on the terms set therein.
☑ I/We agree to accept the Participation Amount as may be allocated to me/us subject to the terms in the Pricing Supplement.
☑ I/We authorise you to enter my/our name on the Register of Noteholders as holders of the Commercial Paper Notes that may be allotted to me/us and to register my/our address as given below.
☑ 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.

**In relation to Eligible Individual Investors Only:**

☑ I have the requisite knowledge, skill and experience in business, financial and investment matters. I am capable of evaluating the merits and risks of an investment in Dufil Prima Foods Plc Series 3 Issuance (the "Issue").
☑ I have made an independent evaluation and judgment of all merits and risks before investing in the Issue and to the extent necessary, I have also made my own legal, tax, accounting and financial evaluation of the merits and risks of investing in the Issue.
☑ I have considered the suitability of the Issue as an investment in light of my own circumstances and financial condition and I am able to bear the risks associated with investing in the Issue.
☑ I wish to be classified as an Eligible Individual Investor, in accordance with the Rules prescribed by FMDQ Securities Exchange.
☑ I make this declaration believing same to be true.

**PARTICIPANT 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 NGN 5,000,000 (Five million naira) and in multiples of NGN1,000 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 APPLICANT(S)' NAME). POST BOX NO. ALONE IS NOT SUFFICIENT**

| CITY | | STATE | | E-MAIL | |
|---|---|---|---|---|---|

**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:** | **CSCS MEMBER CODE:**

***Please note the Issuer, Arranger, Dealer and ICPA will not be responsible for incorrect CSCS account details provided***

**BANK DETAILS**

| BANK NAME | | BRANCH | |
|---|---|---|---|
| ACCOUNT NO: | | CITY/STATE | |

| SIGNATURE | 2ND SIGNATURE (CORPORATE/JOINT) | OFFICIAL SEAL/RC. NO. |
|---|---|---|
| | | |
| **NAME & DESIGNATION** *(Corporate only)* | **NAME & DESIGNATION** *(Corporate only)* | |
| | | |
| **WITNESS NAME** *(Eligible Investor only)* | **WITNESS SIGNATURE** *(Eligible Investor only)* | |
| | | |