



Authorised Individuals

Who will be permitted to access at the paralla j.s.a. account?

Company Name: _____

Full Name/Company Name:			
Date of birth:		Address:	
Nationality:		Shares:	

Full Name/Company Name:			
Date of birth:		Address:	
Nationality:		Shares:	

Full Name/Company Name:			
Date of birth:		Address:	
Nationality:		Shares:	

Full Name/Company Name:			
Date of birth:		Address:	
Nationality:		Shares:	

Full Name/Company Name:			
Date of birth:		Address:	
Nationality:		Shares:	

Full Name/Company Name:			
Date of birth:		Address:	
Nationality:		Shares:	

Date: _____

Signature: _____

Signature of authorized person(s)
allowed to sign on behalf of the company