

FORM 14
Notice of
TRANSFER OF SHARES OF A COMPANY

Companies Act Chapter 42:01

Name of Company

UIN:

Type of Company: **Private Company** OR **Public Company**

1. TRANSFER OF SHARE DETAILS

Set out in the table below are particulars of the transfer of shares of the above-named company. Provide this information in the prescribed format for every shareholder within the transfer.

DETAILS FROM WHOM SHARES HAVE BEEN TRANSFERRED FROM

Shareholder Details (Transferor)	Shareholder Details (Transferee)
Name: Address: Postal Address: Number of shares transferred: Date of Transfer:	<div style="border-bottom: 1px solid black; padding-bottom: 5px;"> <p>*INDIVIDUAL</p> Identity Number: (*For non-citizens either National ID or Passport) First, Middle & Last Name: Nationality: Gender: Date of Birth: Mobile Number: Email Address: Shares Jointly Held: Yes or No Nominee Shareholder: Yes or No Beneficial Owner: Yes or No</div> <div style="padding: 5px;"> Residential Address: Postal Address: Number of Shares issued to Shareholder: Date of Transfer: </div> <div style="border-bottom: 1px solid black; padding-bottom: 5px;"> <p>*BODY CORPORATE</p> Company Name: Registration Number: Country of Registration: Shares Jointly Held: Yes or No Nominee Shareholder: Yes or No Beneficial Owner: Yes or No</div> <div style="padding: 5px;"> Registered Office: Postal Address: Number of Shares issued to Shareholder: Date of Transfer: </div> <div style="padding: 5px;"> <p>*Beneficial Ownership Details (if applicable)</p> Identity Number: (*For non-citizens either National ID or Passport) First, Middle & Last Name: Telephone: Mobile Number: Email Address: Residential Address: Postal Address: </div>

*Complete where applicable

TRANSFER OF SHARES OF A COMPANY (continued)

Name of Company

UIN:

TRANSFER OF SHARE DETAILS (Continued)

Set out in the table below are particulars of the transfer of shares of the above-named company. Provide this information in the prescribed format for every shareholder within the transfer.

DETAILS FROM WHOM SHARES HAVE BEEN TRANSFERRED FROM

Shareholder Details (Transferor)	Shareholder Details (Transferee)
Name: Address: Postal Address: Number of shares transferred: Date of Transfer:	<p>*INDIVIDUAL</p> Identity Number: (*For non-citizens either National ID or Passport) First, Middle & Last Name: Nationality: Gender: Date of Birth: Mobile Number: Email Address: Shares Jointly Held: Yes or No Nominee Shareholder: Yes or No Beneficial Owner: Yes or No
	<p>*BODY CORPORATE</p> Company Name: Registration Number: Country of Registration: Shares Jointly Held: Yes or No Nominee Shareholder: Yes or No Beneficial Owner: Yes or No
	<p>*Beneficial Ownership Details (if applicable)</p> Identity Number: (*For non-citizens either National ID or Passport) First, Middle & Last Name: Telephone: Mobile Number: Email Address: Residential Address: Postal Address:

*Complete where applicable

TRANSFER OF SHARES OF A COMPANY (continued)

Name of Company

UIN:

2. LIST OF EXISTING SHAREHOLDERS

Set out below are the name and address of every shareholder of the company including number of shares allocated from the date of this notice.

Name of Shareholder and Shares Allocated	Physical and Postal Address

3. ACCOMPANYING DOCUMENTS

Tick where applicable

The following documents must accompany this form:

- a. Copy of Extract from Share Register
- b. If a person is a newly appointed shareholder and is a non-Botswana citizen, a certified copy of their passport. If this is not in English, it should be accompanied by a certified translation.
- c. If a body corporate registered outside Botswana is a newly appointed shareholder, evidence of incorporation in their home jurisdiction is required
- d. The consent form of every newly appointed shareholder.

4. DECLARATION

Tick to confirm information if new shareholders have been appointed

Tick to confirm information in all cases

- I confirm I am either a director of this company or a person authorised to complete this application on their behalf and have all necessary enquiries to ensure that the information contained in this application is true and correct. I understand that knowingly making false statement or misleading representation or omission is an offence under the Companies Act.

Signed By:

Signature: Date

Completed by:

Postal Address:

*Identity Number:
(*For non-citizens either National ID or

Telephone:

Mobile:

Email: