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Malta Stock Exchange

Garrison Chapel, Castille Place

Valletta CMR 01

Tel: (+356) 21244051

Fax: (+356) 25696316

Our Ref.- _____

INFORMATION REQUIRED IN CONNECTION WITH THE RELEASE OF CERTAIN* LISTED SECURITIES PERTAINING TO THE ESTATE OF DECEASED INVESTORS.

(*This form is to be completed in connection with the causa mortis release of listed securities issued by AX Investments plc , Corinthia Finance plc, FIMBank plc, Gasan Finance Co. plc, GlobalCapital plc, GO plc, International Hotel Investments plc, Mediterranean Investments Holding plc, MIDI plc, Simonds Farsons Cisk plc, United Finance plc, Island Hotels Group Holding plc, 6pm Holdings plc, Mediterranean Bank plc, RS2 Software plc, Tigné Mall plc, Malita Investments plc Ordinary B Shares & Pendergardens Developments plc)

This form is to be filled in legibly, preferably with the use of a computer, typewriter or other wordprocessor

THIS FORM IS TO BE SENT TO THE EXCHANGE TOGETHER WITH AN ORIGINAL / AUTHENTICATED COPY OF THE DOCUMENTS MENTIONED HEREIN IN SUPPORT OF THE DETAILS PROVIDED IN THIS FORM.

1. **Full particulars of deceased.**
(Name and surname, father's name, mother's name and maiden surname, status of the deceased)
2. **I.D. Card Number of deceased.**
3. **Permanent address before death.**
4. **Full particulars of surviving spouse of the deceased, if applicable.**
(Name and surname, address and I.D. card number)
5. **Date and place of death.**
(Attach Death Certificate issued by the Public Registry)

6. State whether the deceased died testate or intestate.

(Attach the Testamentary Research Certificates issued by the Public Registry and by the Second Hall Civil Court respectively with respect to public and secret wills.

If deceased died testate, attach a certified copy of the last will)

7. If the deceased died intestate, state whether a Declaration of Opening of Succession of the deceased has been made by the Civil Court, Second Hall.

(In the affirmative attach a legal copy of the Court Decree)

8. Details of any Power of Attorney in force among heirs.

Attach Power(s) of attorney.

When granted by Maltese residents, Power(s) of Attorney should be attested to by a Lawyer or Notary Public.

When granted by non-Maltese residents these should be attested to by a Bank Official of a well-known Bank, Malta Consular Official or Notary Public in the country concerned.

9. Name, address and ID Card number of heirs, legatees and usufructuaries.

State whether any of such heirs, legatees or usufructuaries is a minor (under 18 years of age), interdicted or incapacitated.

In the case of minors,

- (i) give dates of birth; and
- (ii) attach an authenticated copy of the note of enrolment of the legal hypothec registered in favour of the minor in terms of law.

In the case of interdicted or incapacitated persons, a legal copy of the Court Decree is to be submitted.

10. The attached form [on page 7] giving details of the family of the deceased must be drawn up by a responsible person who certifies that he/she knew well the family of the deceased (e.g. Notary, Lawyer, Parish Priest etc.) unless a declaration to this effect is incorporated in the advice of the lawyer/notary hereunder.

11. Details of Listed Securities to which this form relates specifying
(i) the name, number and Issuer of such securities;
(ii) the MSE Account Number in which such securities are held; and

(iii) the name/s in which such securities are held namely:-

(a) in the name of the deceased alone;

(b) in the name of the surviving spouse alone;

(c) in the name of the deceased jointly with others;

(d) in the name of the surviving spouse jointly with others;

(e) in the name of others, but in respect of which the deceased enjoyed the right of usufruct.

I HAVE PERSONALLY VERIFIED THE FACTS AS STATED HEREON AND ADVISE AS FOLLOWS:

Kindly provide instructions in the space provided hereunder as to agreement of the heir/s, legatee/s and surviving spouse, if applicable, with respect to the release of the securities to which this form refers.

Kindly support such instructions by an original or authenticated copy of a private agreement or written instructions of the heir/s, legatee/s and the surviving spouse or his/her/their attorneys [attested by a notary / lawyer as to their signature and identity] in the following cases:-

- **where such securities are not precisely divisible in accordance with the provisions of the last will of the deceased or the rules of intestacy, as applicable; or otherwise**
- **where the heir/s, legatee/s and the surviving spouse, if applicable, wish to divert from the testamentary dispositions / rules of intestacy.**

The amount of _____ (insert here details of securities) are to be registered in the name of:

Name: _____ I.D. Card No. _____

Address: _____

Subject to the right of usufruct in favour of:

Name: _____ I.D. Card No. _____

Address: _____

The amount of _____ (insert here details of securities) are to be registered in the name of:

Name: _____ I.D. Card No. _____

Address: _____

Subject to the right of usufruct in favour of:

Name: _____ I.D. Card No. _____

Address: _____

The amount of _____ (insert here details of securities) are to be registered in the name of:

Name: _____ I.D. Card No. _____

Address: _____

Subject to the right of usufruct in favour of:

Name: _____ I.D. Card No. _____

Address: _____

The amount of _____ (insert here details of securities) are to be registered in the name of:

Name: I.D. Card No.

Address:

Subject to the right of usufruct in favour of:

Name: I.D. Card No.

Address:

The amount of _____ (insert here details of securities) are to be registered in the name of:

Name: I.D. Card No.

Address:

Subject to the right of usufruct in favour of:

Name: I.D. Card No.

Address:

The amount of _____ (insert here details of securities) are to be registered in the name of:

Name: I.D. Card No.

Address:

Subject to the right of usufruct in favour of:

Name: I.D. Card No.

Address:

The amount of _____ (insert here details of securities) are to be registered in the name of:

Name: I.D. Card No.

Address:

Subject to the right of usufruct in favour of:

Name: I.D. Card No.

Address:

The amount of _____ (insert here details of securities) are to be registered in the name of:

Name: I.D. Card No.

Address:

Subject to the right of usufruct in favour of:

Name: I.D. Card No.

Address:

Upon vetting of this form as well as the documents requested above, the Exchange may proceed to request the submission of further information or documentation, as necessary, on a case by case basis.

Signature of Lawyer/Notary _____

Name in Block Letters _____

Address _____

Tel. No. _____

Date _____

This _____ day of _____ 20_____.
I, the undersigned _____ of _____

declare that to the best of my knowledge _____

died on _____.

A. She/He died married (N.B. If without children section B should also be completed)

(i) Name of widow/widower/predeceased spouse

(ii) Name and ages of children (State name of husband of married women) Please indicate any pre-deceased children.

1. _____ 6. _____

2. _____ 7. _____

3. _____ 8. _____

4. _____ 9. _____

5. _____ 10. _____

(iii) Name and ages of children of any of the pre-deceased in A(ii) above

1. _____ 3. _____

2. _____ 4. _____

B. She/He died unmarried/childless

(i) Name of parents stating

1. _____

whether dead or alive

2. _____

(ii) Names and ages of surviving

1. _____

brothers and sisters

2. _____

3 _____

4 _____

5 _____

6 _____

(iii) Names & ages of brothers and

1 _____

sisters predeceased

2 _____

3 _____

4 _____

(iv) Names and ages of children

1 _____

of (iii) above

2 _____

3 _____

4 _____

5 _____

6 _____

(In all cases state name of husbands of married females)

I declare that I have known the family of the deceased for _____ years and that I am in a position to certify that the information given above is correct.

Signature _____

Name, address & qualification