"Alfa-Pharm" CJSC bond purchase application-order for individuals (individual entrepreneurs)

Application-order submission			
INVESTOR INFORMATION	N		
Surname, name, patronymic			
Identification document		Issuing authority	
number		_	
Issuance date		Valid until	
Registered address		Residency	
Public services number		Investor's phone number	
Bank account No.		Name of the bank	
Securities account No.		Name of the securities account registrar	
BOND DETAILS ¹			
ISIN of purchased bonds		AMALPHB22ER4	
Bonds purchase date			
Bonds purchase quantity a	and price		
Quantity of bonds (in figures) Bond pu		ırchase price (in figures)	→ ⊠ AMD
Total amount paid for the p	urchased bonds (in figures)		

¹ Relevant funds for purchase of bonds must be credited by investors to account **1570043106014600** by the end of the application-order submission date.

☐ I instruct the Bank to withdraw the amount	for purchase of bonds from my b	oank account #15700²
DECLARATION		
therein, including the Prospectus and requirements.I fully realize and accept the responsi	on-order and/or the purchase/mad I hereby confirm that I comply with bilities and potential risks associad to the Bank by me have been tale, trafficking, tax evasion or othe plication-order is a duly documen	nagement of the securities mentioned with their conditions, restrictions and ted with investing in bonds. obtained lawfully and are in no way ner illegal activities. ited and valid agreement between me
Name, Surname	Signature	Date

 $^{^{2}}$ If the investor has an active bank account at Ameriabank CJSC, this application will also serve as a payment order to transfer the purchase amount from the said bank account.