| a) | Do you have a paybill number? | PAYMENT DETAILS | |
|-----------|---|---|--|
| | Yes | | |
| | No Registered Paybill | If so would you like us to register on your behalf? | |
| b) | number Name of registered Paybill | tibanosa | |
| d) | Registered ID number | 22707826 | |
| 4 REFEREE | | | |
| | Key Contact | | |
| a) | Referee Name | CATHEYNE WANGARI MBUGUA | |
| b) | Telephone Number | 0721245625 | |
| c) | Email Address | Kaytembugua@gnail.com | |
| d) | Organization | DHARMACIA SEVEN 40 | |
| e) | Position | DIRECTOR | |
| | Company Stamp | PHARMACIA OLTD. HEALTH, BEAUTY, LIFESTYLE 7 1 FEB 2017 P. O. Box 7-276-00400 NAIROBI CELL:0732 656010 | |

| | 2 | CONTACT DETAILS |
|------|--|--|
| | Kindly fill in the contact of | the contact person in your organization and a financial contact |
| | Key Contact | |
| | Name of contact a) person | DAVID MUTIE MBITHT |
| ŀ | b) Telephone Number | 0720 429671 |
| 1 | c) Email Address | Lavid. I mitie & grail. com |
| d | d) Position | david. Inntie & gnail. com OWNER & MANANGING DIRECTOR |
| e |) Signature | The state of the s |
| | Finance | |
| a | Name of contact) person | LENIS MWANIKI MBITHT |
| b | Telephone Number | 0725 100 119 |
| c) | Email Address | Leurs mwaniki e gmail-com |
| d) | Position | GINANCE MANAGER |
| e) | Signature Key Administrator * The person that will interact most with the API | |
| a) | Name of contact person | MICHAEL D. WAHYAMA |
| b) | Telephone Number | 0725821671 |
| c) | Email Address | mjwanyama @gmail.com |
| d) | Position | 170 |
| ·) : | Signature | Jan. |



| | Electronic Co. | | | |
|----------|--------------------------|--|--|--|
| | PAYMENTS API CLIENT FORM | | | |
| | 1 | 1 Company Details | | |
| a | *Pled | pany Name ase attach ficate of poration | TIBA NWJA INVESTMENT | |
| b | _ | cal Company ess | LANGATA | |
| c) | | al Address E.G. P.O 0000-000100 | BOX 70873 - 00400 | |
| d) | Telep | hone 1 | 0732656010 | |
| e) | Telepi | hone 2 | 0720 429671 | |
| ŋ | Email | Address | tibamoja C gmail. com | |
| g) h) | attact | umber *Please n your PIN Industry are you | PHARMA CENTICALS | |
|) | | ng have you n operation? | START UP | |
|) | | | Reason for Payments API | |
| | B2C | | | |
| | C2B | | | |
| | B2B | | ₹ | |
| 4 | Brief de | escription of use | Facilitation of payments for products | |