Form 11

(Regulation 12)

(In typescript and completed in duplicate)



**THE PATENTS AND COMPANIES REGISTRATION AGENCY**

**The Companies Act, 2017**

**(Act No. 10 of 2017)**

**\_\_\_\_\_\_\_\_\_\_\_\_**

**The Companies (Prescribed Forms) Regulations, 2018**

***(Section 140 and 150)***

***Available at*** [***www.pacra.org.zm***](http://www.pacra.org.zm)

|  |
| --- |
| **NOTICE OF ALTERATION OR REDUCTION OF SHARE CAPITAL** |
| **PART A****COMPANY DETAILS** |
|  | Company Number*Indicate the 12 digit registration number* |  |  |
|  | Company Name*Indicate the name as captured on the certificate of incorporation* |  |  |
|  | Phone Number*Include the international code (e.g. +260 for Zambia)* | *Mobile* |  |  |
| *Landline* |  |
|  | Email Address |  |  |
|  | Type of Alteration *State the nature of alteration* | Shares Increased |  | *Attach special resolution* |
| Shares Consolidated |  |
| Shares Divided |  |
| Shares Subdivided |  |
| Shares Converted |  |
| Shares Cancelled |  |
| The Stock Reconverted |  |
| Shares Redeemed |  |  |
| Shares Reduced |  | *Attach court order* |
|  | Date of Resolution  |  |  |
|  | Nominal Capital | *Current* |  |  |
| *New* |  |  |
|  | Class of Shares*If “other” indicate the specific class of shares* | ORDINARY | PREFERENTIAL | OTHER |  |
|  | Number of Shares *Indicate Nominal Capital before and after alteration* | *Current* |  |  |  |  |
| *New* |  |  |  |  |
|  | Par Value | *Current* |  |  |  |  |
| *New* |  |  |  |  |
|  | Amount of reduction *Applicable to reduction in capital* |  |  |
|  | Court Order*Indicate Court order number and attach court order where there is a reduction in capital* |  |  |
| **PART B****DECLARATION** |
|  | I, the undersigned, confirm that the information contained above is true and correct.First Name:Surname:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Capacity: | Director |  | Secretary |  |

Signature: Date: |
| **PART C****PARTICULARS OF PERSON LODGING NOTICE** |
|  | First Name |  |  |
|  | Surname |  |
|  | Gender |  |
|  | Date of Birth |  |
|  | Nationality |  |  |
|  | Identity TypeFor Zambians: *NRC* For non-Zambians: *NRC/Passport/ Driver’s Licence/Resident Permit* |  |  |
|  | Identity Number |  |
|  | Phone Number | *Mobile* |  |
| *Landline* |  |
|  | Email Address |  |  |
|  | Physical Address | *Plot/House/ Village* |  |  |
| *Street* |  |
| *Area* |  |
| *Town* |  |
| *Province* |  |
| *Country* |  |
|  | Signature: Date: |
| *Attach Form 20 where applicable* |