# THIRD SCHEDULE

(Made under rule 9(2)(b))

CMT FORM No.2

#### IN THE CAPTIAL MARKETS TRIBUNAL

	AT			
		In the matter of the intended		
	APPEAL NO	OF		
		BETWEEN		
				APPELLANT
		AND		
				RESPONDENT
		STATEMENT OF APPEAL		
1. PARTIC	CULARS OF THE	EAPPELLANT		
(a) Name:_				
(b) Postal ad	ldress			
(c) City,		_ Municipality,	Town,	
(d) Telephon	ne Number			
(e) Fax num	ber	E-mail Addre	ess	

## 2. STATEMENT OF FACTS SUPPORTING THE APPEAL

(If space provided is not adequate, attach as many additional pages as needed for the statements)



GN. NO. 649 (Contd)

# 3. GROUNDS/ REASONS FOR THE APPEAL

### 4. LIST OF DOCUMENTS OR ITEMS TO BE PRODUCED BEFORE THE CM TRIBUNAL

(Give brief description of each document or items attached to the Statement of Appeal and number them accordingly :)

S/N	Number of	Description	Source/Author	
	Document/Appendix			

## 5. REMEDIES/RELIEFS/CLAIMS SOUGHT: (number them consecutively)

5.1
5.2
5.3
5.4
5.5
5.6.
5.7
5.8
5.9
5.10

#### 6. PARTICULARS OF WITNESS

S/N	NAME	DESIGNATION	ADDRESS

GN. NO. 649 (	(Contd)
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Dated this	day of		_ 20	
Name:				
Designation:				
Signed by:	(th	e Appellant/Le	egally Authorized	
FOR OFFICIAL USE ONLY (REGISTRY)				
Received by the Registry this		day of		20
at (AM/PM)				
Name:	Designation			
Signature	_			
Official Stamp				
7. COPY OF THE STATEMENT OF APPEAL Name:	TO BE SERVE	D UPON:		
Address:				
Tel:				
Date:				
Signature of the recipient:				
Designation:				
Official stamp				