# Gibraltar Savings Bank

## Instructions On Maturing Debentures

5 Year Fixed Term Monthly Income Registered Debentures 1st July 2025



	Transaction Statement No.(s)	)	Total Value : £			
	1. Details of the Organisation	)n				
	Name:					
	Registered Address:					
	Email:					
	Contact No. :					
	Name of Pension Scheme Me (If applicable)	ember:				
	2. Primary Contact Details					
Please note that these details will be the point of contact for this Investment Account.						
	Correspondence Address:					
	Email:			Contact No.:		
	3. Details of the authorised	signatories				
A.1	Forename(s)		Surname(s)			Date of Birth
	Position in Organisation Tel	lephone:		Email:		
A.2	Forename(s)		Surname(s)			Date of Birth
	Position in Organisation Tel	ephone:		Email:		
 A.3	Forename(s)		Surname(s)			Date of Birth
	Position in Organisation Tel	ephone:		Email:		DD MM YYYY
A.4	Forename(s)		Surname(s)			Date of Birth
	Position in Organisation Tel	ephone:		Email:		
	Please specify the number of are required.	signatures re	quired to autl			imum of two signatures
	4. Interest Payment Instruct	tions				
	Bank			Sortcode	Account	No.
	Reference (If applicable) Additional applicable)	ccount Name				
	Diagon tick the appropriate how	Enisting Down	· · · · / T· · · / · · · · / · · ·	Ν	Jew Payment Inst	truction

Existing Payment Instruction

Please tick the appropriate box:

#### 5. Reinvestment Details

### Section (A) - Minimum investment £1,000

Investment	Int. Rate	Amount
1-Year Economic Development Fixed Term Registered Debentures June 2026	4%	
3-Year Economic Development Fixed Term Registered Debentures June 2028	5.25%	
5-Year Economic Development Fixed Term Registered Debentures June 2030	5%	

#### Declarations

I/We hereby confirm that I/we understand that no withdrawals are permitted on this debenture.

Please initial here **X**\_\_\_\_

#### Section (B) - Minimum investment £1,000

Investment	Int. Rate	Amount
3-Year Fixed Term Monthly Income Registered Debentures	4%	

#### Maturity Instructions - Ordinary Deposit Account Details

Account No.	Account Name			
	Please tick the appropriate box:	Existing Account	New Account	

#### 6. Redemption Details

I/we wish to redeem the above-mentioned Debenture Reference No.(s), and I/we understand that the capital will be deposited in the same bank/Ordinary Deposit Account where the interest is credited.

Total Value £

#### 7. Signatures

I/We accept the terms and conditions of investment as specified in the Prospectus and General Conditions. I/We authorise our Ordinary Deposit Account to be debited with the investment value (if applicable).

Signatory 1	Signature		Signatory 2 Sig	gnature	
	Date:	DD MM YYYY		Date:	DD MM YYYY
Signatory 3	Signature		Signatory 4 Sig	gnature	
	Date:	DD MM YYYY		Date:	DD MM YYYY

#### 8. Data Protection – How we use your Information

We treat all the information you give us about you and others as private and confidential. We respect your right to privacy and understand the importance of protecting the personal information that we hold. See our privacy notice for full details – available at www.gsb.gov.gi or by calling us.

For GSB Use Only		
Processed by:	Verified by:	Date:
		DD MM YYYY