

# Gibraltar Savings Bank Instructions On Maturing Debentures

3 Year Fixed Term Monthly Income Registered Debentures 1st October 2024



	Debenture Reference No.(8)			lotal value : t			
	1. Details of the Organisation						
	Name:						
	Registered Address:						
	Email:						
	Contact No.:						
	Name of Investment:						
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 authori	sed signatories					
1.1	Forename(s)		Surname(s)			Date of Birth	
	Position in Organisation	Telephone:		Email:		DD MM YYYY	
_ \.2	Forename(s)	'	Surname(s)			Date of Birth	 -
	Position in Organisation	Telephone:		Email:		DD WINI 1111	
_ \.3	Forename(s)	'	Surname(s)			Date of Birth	
	Position in Organisation	Telephone:		Email:			
_ \.4	Forename(s)	J	Surname(s)			Date of Birth	-
	Position in Organisation	Telephone:		Email:		DD MM YYYY	
	Please specify the number are required.	er of signatures re	equired to autl	•		imum of two signatures	
4. Interest Payment Instructions							
	Bank			Sortcode	Account	No.	
	Reference (If applicable)	Account Name	<u> </u>				
	Please tick the appropriate box	x: Existing Payr.	nent Instruction	No	ew Payment Inst	truction	

#### 5. Reinvestment Details

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

Investment	Int. Rate	Amount
1-Year Economic Development Fixed Term Registered Debentures September 2025	6%	
3-Year Economic Development Fixed Term Registered Debentures September 2027	5.5%	
5-Year Economic Development Fixed Term Registered Debentures September 2029	5%	

Dac	lم	ration	

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	Interest Rate	Amount
1-Year Fixed Term Monthly Income Registered Debentures	4.75%	
3-Year Fixed Term Monthly Income Registered Debentures	4.50%	
5-Year Fixed Term Monthly Income Registered Debentures	4.25%	

Please complete if you have selected a debenture in Section A and/or B:

	Maturity	y Instructions -	Ordinary	Deposit	Account	Details
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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 and hereby apply to open the following Gibraltar Savings Bank Debenture Account:

Signatory 1	Signature		Signatory 2 Signature	
	Date:	DD MM YYYY	Date:	DD MM YYYY
Signatory 3	Signature		Signatory 4 Signature	
	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.

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Processed by:	Verified by:	Date:
		DD MM YYYY