

Gibraltar Savings Bank

Instructions On Maturing Debentures





	Transaction Statement No	D.(<u>s)</u>		Т	otal Value : £	
	1. Details of the Organisa	ation				
	Name:					
	Registered Address:					
	Email:					
	Contact No.:					
	Name of Pension Scheme (If applicable)	Member:				
	2. Primary Contact Deta	ils				
	Please note that these details Correspondence Address:	-	int of contact for t	his Investment Ac	ecount.	
	Email:			Contact No.:		
	3. Details of the authoris	sed signatorie				
1.1	Forename(s)		Surname(s)		Date of Birth	VVV
	Position in Organisation	Telephone:		Email:		
- 1.2	Forename(s)		Surname(s)		Date of Birth	YVY
	Position in Organisation	Telephone:		Email:		
_ \.3	Forename(s)		Surname(s)		Date of Birth	YYY
	Position in Organisation	Telephone:		Email:		
- \.4	Forename(s)		Surname(s)		Date of Birth	YVY
	Position in Organisation	Telephone:		Email:		
	Please specify the number are required.	r of signatures	s required to auth	·	ction. A minimum of two signa	itures
	4. Interest Payment Instr	ructions				
	Bank			Sortcode	Account No.	
	Reference (If applicable)	Account Na	me			
	Please tick the appropriate box	Existing 1	Payment Instruction	N	New Payment Instruction	

5. Reinvestment Details

Section (A) - Minimum investment £1,000

Investment	Int. Rate	Amount
1-Year Economic Development Fixed Term Registered Debentures September 2026	3.75%	
5-Year Economic Development Fixed Term Registered Debentures September 2030	4.75%	

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Section (B) - Minimum investment £1,000

Investment	Int. Rate	Amount
3-Year Fixed Term Monthly Income Registered Debentures	3.75%	

Maturity Instructions - Ordinary Deposit Account Details

Account No.	Account Name	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 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