Gibra Registered	Debentures Ap	pplication For	m - Organis	onditions and hereby apply
to purchase the fol	lowing Gibraltar Savings Bar			onations and nereby apply
1. Details of the Organis Organisation Name:	sation	Nature of Bu	siness:	
Address:				
Email:		Telephone:		
Should the organisation own		re/Bonds please enter	Account No.	
2. Details of the authoris	U U	Date of Birth	Statue/Daple	Talanhana
1 Forename(s)	Surname(s)	Date of Birth	Status/Rank	Telephone:
ID or Passport Number	Address:		Em	ail:
2 Forename(s)		Date of Birth	Status/Rank	Telephone:
ID or Passport Number	Address:		Ema	-1
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are required.	er of signatures required	signatories	nsaction. A minin	num of two signatures
are required. Please tick box if another form is re 3. Details of the benefici 1 Forename(s)	er of signatures required equired to add more authorised al owners, directors &	signatories /or shareholders, pe	nsaction. A minin	num of two signatures e mber Telephone:
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6. Investment	Options				
Minimum invo	estment £1,000				
		Rate	Amount		
3-Year Fixe	3-Year Fixed Term Monthly Income Registered Debentures				
	Total Value £				
7. Method of H	Payment				
Cheque £	Cheque No.	Sort Code	Account Number		Account Name
Bank Transfer £		Sort Code	Account Number		Account Name
Debit Card £	Last 4 digits	Sort Code	Account Number		Account Name
Ordinary Depos £	it		Account Number		Account Name
£					
Total Investmen	t				
8. Source of In	vestment (Pleas	se specify)			

Please note that you may be asked to supply documentary evidence to verify the source of funds. Such evidence will be required, in any case, where the investment, or series of investments, is greater than £10,000.

9. Organisation Consent (If applicable)

We hereby confirm that the GSB has informed us that we may provide redacted bank statements. We however confirm that we have willingly provided the Gibraltar Savings Bank with full unredacted bank statements.

10. Declarations and Signatures

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

Signature

Signature

Please initial here X

Date:

Date:

All signatories must sign

11. 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 Office Use Only		
Company No.	Receipt / JV No.	Date of Purchase:DDMMYYYY
Processed by:	Verified by:	Date: