

CITI MANDATE: (MALTA-SEPA)

IMPORTANT

PLEASE CONFIRM
THE TYPE OF
CURRENCY USED
BY YOUR
ACCOUNT

(Tick one ✓)

<input type="checkbox"/> NEW	<input type="checkbox"/> AMENDMENT
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HOW TO FILL IN THE FORM

- Please read the leaflet carefully then fill in the form in CAPITAL LETTERS.
- Fill in Parts 1 and 2. Your overseas bank will help you if you are not sure.
- Sign Part 3.

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PART 1

Forename(s)

Surname

Your Address:

Your Reference Number:

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PART 2

Full Name and Address of Bank or Financial Institution

International Bank Account Number (IBAN) MANDATORY

Bank Identification Code (Swift BIC) MANDATORY

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Name of Account Holder MANDATORY

Account type : (Tick one ✓) Mandatory

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

01 Savings Account

02 Checking and Current Account

03 Others

Sort code ONLY MANDATORY FOR NON EURO PAYMENTS

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Account Number ONLY MANDATORY FOR NON EURO PAYMENTS

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PART 3. Please read and sign below.

I have read and understood the leaflet which accompanied this form and wish the payment to be paid by direct deposit to the account noted above.

Signature _____

Date _____