Certified Copy of Identity Card (ID)



Receiving stamp

## **CENTRAL BANK OF SWAZILAND**

Investments and Exchange Department, P.O. Box 546, Mbabane, Tel: 2408-2144 / 2212, Fax 2404-8530

## **GOVERNMENT BONDS APPLICATION FORM FOR INDIVIDUAL INVESTORS**

Tender Date										LOCAL CODE (T	ENDER	NO :)											
Settlement Date										ISIN CODE													
Maturity Date										-					•	•			•				
Investor's/Account Name										FINANCIAL DETAILS													
ID Number																							
Nationality										Nominal amount applying for (Minimum of E10,000 in multiples of E1,000)													
Next of Kin										Nominal Amount in words:													
Telephone										SOURCE OF FU	NDS:												
Relationship  CONTACT DETAILS OF INVESTOR:									At maturity and/or payment of coupons, please indicate how you want your Account to be credited;													ır	
Postal Address:								By transfer:															
Physical Address:									By Cheque:														
Telephone:	Cell: Fax:							Name to whom Cheque will be drawn															
Email:									If you need a transfer to your Account, specify details below;														
Occupation:							Name of Bank:																
Please fill all the sections and make sure the information entered into this							Branch Name:																
form is correct and accurate. By signing this form, you agree that the information entered is correct and will be used on the Government Bond							Branch Code:  Account Number:																
processing: Signature:									Account Number											_			
Date:																							
No application will be processed without an applicant's signature											1.												
<ul> <li>It remains the duty of the applicant to find out whether the application made was successful or not.</li> <li>Money will be deposited back to the customer should the application be unsuccessful.</li> </ul>																							
All bids must be submitted in multiples of E1, 000 subject to a minimum bid amount of E10, 000																							
DECEIVED AND CH																							

SIGNATURE: ...... DATE: ......