

# CITI MANDATE: (ST VINCENT & GRENADINES)

Application for payment by direct deposit.

**IMPORTANT**

PLEASE CONFIRM  
THE TYPE OF  
CURRENCY USED BY  
YOUR ACCOUNT

.....

TICK AS APPROPRIATE

NEW		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.
- The Company remitting your payment will complete the Reference number field.

**PART 1.**

Your Name: Forename(s) \_\_\_\_\_ Surname \_\_\_\_\_

Your Address:

\_\_\_\_\_

\_\_\_\_\_

Your Reference Number: \_\_\_\_\_ Scheme: \_\_\_\_\_

**PART 2**

Full Name of Bank or Financial Institution (Max 70 Characters)

\_\_\_\_\_

Branch Name & complete address of bank

\_\_\_\_\_

\_\_\_\_\_

Name of account holder

\_\_\_\_\_

Bank routing no.			Branch Transit code			

Account number

0	0	0	0	0	0										
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Account type : (Tick one ✓) Mandatory

<input type="checkbox"/>	Savings Account
<input type="checkbox"/>	Checkings Account
<input type="checkbox"/>	Others

Bank Identification Code (Swift BIC)

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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 \_\_\_\_\_