CITI MANDATE: (GHANA)	IMPORTANT
Application for payment by direct deposit.	PLEASE CONFIRM THE TYPE OF CURRENCY USED BY YOUR ACCOUNT
NEW AMENDMENT	
 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 Remitter Code and Refe fields. 	rence number
PART 1. Your Name: Forename(s) Surname	
Your Address:	
Your Reference Number: Scheme:	

PART 2

Full Name of Bank or Financial Institution
Branch Name & complete address of bank

Beneficiary Bank Identification Code (Swift BIC)

Beneficairy bank's USD correspondent code or Swift code

Na	me	of	ac	CO	unt	ho	lde	er													

Account number

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 _____