## **CITI MANDATE: (KENYA)**

## Application for payment by direct deposit.

## TICK AS APPROPRIATE NEW AMENDMENT

## HOW TO FILL IN THE FORM

Forename(s)

- 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.

PART 1. Your Name:

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

**IMPORTANT** 

PLEASE CONFIRM THE TYPE OF

YOUR ACCOUNT

**CURRENCY USED BY** 

Your Address (City, State and Area Zip Code:
Your Reference Number: Scheme:
PART 2 Full Name of Bank or Financial Institution
Branch Name & complete address of bank
Ponoficiary bank and branch clearing code
Beneficiary bank and branch clearing code
Name of account holder
(Format : Beneficiary First Name< <space>&gt;Beneficiary Middle Name*&lt;<space>&gt;Beneficiary Last Name)</space></space>
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.
Oirm share
Signature Date

Surname