CITI MANDATE: (MAURITIUS)

Application for payment by direct deposit.

PART 3. Please read and sign below.

deposit to the account noted above.

Signature

THE TYPE OF **CURRENCY USED BY TICK AS APPROPRIATE** 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 Reference number fields 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 Name of Account Holder **Account number IBAN Number (30 characters) Bank Identification Code (Swift BIC)**

I have read and understood the leaflet which accompanied this form and wish the payment to be paid by direct

Date

IMPORTANT

PLEASE CONFIRM