## **CITI MANDATE: (SIERRA LEONE)**

Application for payment by direct deposit.

TICK AS APPROPRIATE
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HOR AS AFFROFRIATE				
NEW	AMENDMENT			

## HOW TO FILL IN THE FORM

- Please read the leaflet carefully then fill in the form in CAPITAL LETTERS.

<ul> <li>Fill in Parts 1 and 2. Your overseas bank will help you if you are not sure.</li> <li>Sign Part 3.</li> </ul>			
PART 1.			
Your Name: Forename(s) Surname			
Vous Address (DO Daves not accentable)			
Your Address (PO Boxes not acceptable):			
Contact Telephone Number/Email Address:			
Your Pension Reference Number: Scheme:			
PART 2			
Full Name of Bank or Financial Institution			
Branch Name & complete address of bank			
Name of account holder			
Account number			
Bank Identification Code (Swift BIC)			
DADT 0. Blasse med and sine below		1	
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		

**IMPORTANT** 

PLEASE CONFIRM THE TYPE OF

**CURRENCY USED BY** YOUR ACCOUNT