CITI MANDATE: (SRI LANKA)

Application for payment by direct deposit.

deposit to the account noted above.

Signature

PLEASE CONFIRM THE TYPE OF **TICK AS APPROPRIATE CURRENCY USED BY AMENDMENT** NEW YOUR ACCOUNT 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. • 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 Branch Name & Complete Branch Address Beneficiary bank and branch clearing code Name of account holder (Format: Beneficiary First Name<<space>>Beneficiary Middle Name*<<space>>Beneficiary Last Name) **Account Number** Account type :(Tick one ✓) Mandatoryl **Savings Account Checkings Account Others** 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

Date

IMPORTANT