

Debenture Issue:

Gibraltar Savings Bank Instructions On Maturing Debentures



	Please state the transaction not T No. T No. T No.	umbers in the boxes provided T No. T No. T No.	T No. T No. T No.	Total Value £	T No. T No.
	1. Account Type (Please tick appropriate box) Individual OR	Joint If 'Joint'	is ticked please select:	And	* And / Or
1	2. Details of Applicant(s)			Deta of	Disth (DD (10 (GDV))
1	Forename(s)	Surname(s)		Date of	Birth (DD/MM/YYYY)
.2	Forename(s)	Surname(s)		Date of	Birth (DD/MM/YYYY)
.3	Forename(s)	Surname(s)		Date of	Birth (DD/MM/YYYY)
.4	Forename(s)	Surname(s)		Date of	Birth (DD/MM/YYYY)
			licable only		
	This section is ONLY to be co	-			•
1.1	Minor's Forename(s)	Minor's Surna	ame(s)	Date of	Birth (DD/MM/YYYY)
	Relationship to Applicant	**			
	3. Primary Contact Detail	ls			
	Please note that these details	will be the point of contact for	or this Investment A	ccount.	
	Correspondence Address:				
	Email:		Contact No.:		
	4. Interest Payment Instru	actions			
	Bank		Sort Code	Accou	nt Number
	Reference (If applicable)	Account Name	a	New Payment Instru	ction

Existing Payment Instruction

Please tick the appropriate box:

(Proof is required, e.g. Bank Statements)

^{*}We understand and accept that the GIBRALTAR SAVINGS BANK (GSB) will consider itself discharged of its liabilities if any monies are paid to any one of the account

^{**}Parent / Legal Guardian will also be required to sign the form if not applicants (see overleaf)

5. Reinvestment Details

Section (A) - Minimum investment £1,000

Investment	Int. Rate	Amount
1-Year Economic Development Fixed Term Registered Debentures September 2026	4%	
5-Year Economic Development Fixed Term Registered Debentures September 2030	5%	

Declarations

I/We hereby confirm that I/we understand that no withdrawals are permitted on this debenture.

Please initial here X_____

New Account

Section (B) - Minimum investment £1,000

Investment	Interest Rate	Amount
3-Year Fixed Term Monthly Income Registered Debentures	4%	

Please complete if you have selected a debenture in Section A and/or B:

Maturity Instructions - Ordinary I	Deposit Account Details
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Account Number					Account Name			

Please tick the appropriate box: Existing Account

Section (C) - Minimum investment £100

Investment	Interest Rate Per Annum	Amount
10-Year Fixed Term Pensioner Monthly Income Debentures (conditions of eligibility apply, see below)***	Fixed @ 5%	

Total Value £

6. Redemption Details

I/we wish to redeem the above-mentioned Debenture Reference No.(s), and I/we understand that the capital will be deposited in the same bank/ordinary deposit account where the interest is credited.

Total Value £

7. Signatures

I/We accept the terms and conditions of investment as specified in the Prospectus and General Conditions. I/We authorise our ordinary deposit account to be debited with the investment value (if applicable).

Applicant 1 Signature	Applicant 2 Signature
Date: (DD/MM/YYYY)	Date: (DD/MM/YYYY)
Applicant 3 Signature	Applicant 4 Signature
Date: (DD/MM/YYYY)	Date: (DD/MM/YYYY)

8. Data Protection - How we use your Information

We treat all the information you give us about you and others as private and confidential. We respect your right to privacy and understand the importance of protecting the personal information that we hold. See our privacy notice for full details – available at www.gsb.gov.gi or by calling us.

For GSB Use Only

Tor dob ose only		
	Processed by:	Verified by:
Pensioner Verified:		

^{***}The interpretation of a pensioner for this purpose means a resident individual aged 60 years or over, or who has retired and is in receipt of a pension or has received a lump sum payment in lieu of a pension.