

DC _____ / _____



MALTA STOCK EXCHANGE plc

DIRECT CREDIT INSTRUCTIONS FORM

Garrison Chapel, Castille Place,
Valletta VLT 1063,
Malta

Date: _____

Tel: +356 2124 4051
Fax: +356 2569 6316
E-mail: borza@borzamalta.com.mt
Website: www.borzamalta.com.mt

MSE account Number: _____

Company Registration No: C42525

Name/s & Surname/s: 1) _____	ID card N°: _____
2) _____	ID card N°: _____
3) _____	ID card N°: _____

Until further notice please pay all Interest / Dividend due on my/our securities listed below directly into the Bank

NAME OF SECURITY/IES:-

_____	_____
_____	_____
_____	_____
_____	_____

Name of Bank: _____

IBAN: _____

Please sign here:

1. _____	2. _____	3. _____
Full Name _____	Full Name _____	Full Name _____

In case of minor, parent/s or legal guardian/s is / are required to sign whilst in the case of usufruct accounts, usufruct is required to sign.

Telephone / Mobile Number: _____

.....

(Signature of

Witness* to Identity & Signature/s of appearer/s hereon: _____ witness)

Full name of witness in BLOCKS: _____

Witness Address: _____

ID card N°: _____

Rubber-stamp of witness:

*NB: Witness must be a professional¹ or a manager/ director at an MFSA/ or (other reputable jurisdiction regulatory authority) licensed entity. Data Protection Declaration: A MSE plc Data Protection Policy Declaration is available at www.borzamalta.com.mt

¹ "Professional" means a member of the legal / notarial or accountancy professions holding a valid warrant. Professionals from outside Malta need to have their signature apostilled.