

# Signature Mandate Form



The form should be completed in CAPITAL LETTERS.

Branch
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Account Name										
Account Number										
Address										
Telephone	Fax No.				Email					

S/N	Signatory Details	Signatory Specimen	Picture of Signatory
	First Name Middle Name Last Name Class  A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E <input type="checkbox"/>		
	First Name Middle Name Last Name Class  A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E <input type="checkbox"/>		
	Authorized Combination	Company Stamp/Seal (If Required)	

## For Bank Use Only

A/C Officer's Signature	CSO's Signature	HOP's Signature
Signature	Signature	Signature
Name	Name	Name
Date	Date	Date