



**POWER OF ATTORNEY
 FOR TREASURY BILL AND
 CENTRAL BANK BILL TRANSACTIONS**

TYPE OR PRINT IN INK ONLY – ALTERATIONS AND CORRECTIONS WILL NOT BE ACCEPTED – INSTRUCTIONS OVERLEAF

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| 1. INVESTOR INFORMATION | FOR OFFICIAL USE |
| INVESTOR NAME _____ INVESTOR ADDRESS _____ _____ Tel _____ NATIONAL ID CARD / PASSPORT NO. _____ This Power of Attorney is in effect for ALL Treasury Bills and Central Bank Bills maintained in the name of this investor during the term of the authorization. | _____ APPROVED BY _____ DATE APPROVED |

2. POWER OF ATTORNEY

I _____ Hereby Appoint _____ of
Name of Grantor Name of Grantee

Address of Grantee

As my lawful Attorney with authority to perform the authorised transactions described below in my name and on my behalf:
Applications for bills, Rediscount bills, Change of payment information, Transfer or sale of bills, and Reinvestments

The term of this authorization shall be:

Until revoked. This power of attorney shall not be affected by the grantor's subsequent incapacity or disability

For the specific transaction(s) detailed overleaf only.

(Unless otherwise indicated, the term of this authorisation will be for the specific transaction(s) detailed overleaf only.)

3. AUTHORISATION DO NOT sign this form until you are in the presence of a certifying individual

The undersigned hereby ratifies any and all authorised transactions by the designated attorney.

Signature Date

If this Power of Attorney is terminated by operation of law, any person acting in reliance upon it without notice of such termination shall be held harmless.

4. CERTIFICATION The Grantor's signature must be certified by an authorised certifying individual.

Instructions to certifying individual: Name of person(s) who appeared and date of appearance **MUST** be completed.

I certify that _____, whose identity (ies) is/are known or proven
Name of Person(s) who Appeared

to me, personally appeared before me this _____ day of _____ and signed this Power of Attorney.
Month/Year

ACCEPTABLE CERTIFICATIONS:

1. Commercial Bank's official seal or stamp (such as Corporate Seal or Stamp).
2. Notary Public's official seal or stamp

Signature and Title of Certifying Individual

Name of Financial Institution

Address

Address