

NAME _____

ADDRESS _____

DATE _____

The Senior Manager,
Banking Services Department
Central Bank of The Gambia
1 / 2 Ecowas Avenue
Banjul

Dear Sir

PURCHASE OF TREASURY / CENTRAL BANK BILLS

I / we wish to purchase Treasury / Central Bank Bills as detailed below:

Issue Date _____

Maturity Date _____

Amount to purchase D _____

(_____ Dalasis)

Thank you for your cooperation.

Yours Faithfully,
