

Treasury Floriana



MALTA GOVERNMENT STOCK 3.2% MGS 2019 (V) F.I. (MARCH'14)

PRICE OF ISSUE €105.50 PER €100 NOMINAL

NON-COMPETITIVE APPLICATION FORM

Please use block capitals throughout this form

IN ACCORDANCE WITH THE TERMS AND CONDITIONS OF THE RELAVANT PROSPECTUS:

1	I/WE APPLY TO PURCHASE AND ACQUIRE,	
	NOMINAL AMOUNT APPLIED FOR (being a multiple of € 100 with a minimum of €100 and a maximum of €100,000 per person)	AMOUNT PAYABLE (being €105.50 for every €100 nominal of stock applied for)
	EUR	EUR
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2 DETAILS OF APPLICANT

3

Mr/Mrs/Ms/Oth	er									
Name/s										
Address:										
					Post Code					
Company Registration No./I.D C	o. Landli	Landline Telephone No./Mobile No. ((*) MSE Account Number					
(*) The MSE Account Number quoted on the Application Form should be the same MSE Account number currently held in the applicant's name as recorded at the Malta Stock Exchange.										
STATISTICAL CLASSIFICATION										
 This section is used solely for the statistical classification of applicants: mark "X" as applicable If the applicant has been residing/operating, is residing/operating or intends to reside/operate in Malta for one year, mark "X" in Section A and in the appropriate box of Section C. Non-Residents should mark "X" in the appropriate boxes of Section B and Section C. 										
Section A:	Section B:				Manatan / Union Mambar State					
Resident		N	on Resident (of	Monetary Union Member State Other European Union country Other foreign country						
Section C:										
Individuals/NGOs:		Financial comp		any:		Non-financial company/Corpora	tion			
 Individual or Household 		 Credit Instit 				 Private-owned (including Partnerships) 				
 Minors (Under 18 years) 			vestm	rmediary of whi ent Schemes	ch: □ □	 State-Owned 				
Non-Profit Organisation		 Other (Exch Licensed st 	ange k	bureau,		 Government Funds 				

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4	INTEREST MANDATE BY DIRECT CREDIT (SEPA)													
	Bank Branch													
	IBAN (International Bank Account N		 											
	Applicants who have existing	holding in this	Fungibility S	tock a	are t	o ens	ure th	nat th	ne IBA	N ar	nd de	tails	s as	 ;
	quoted above in respect of the present Application <u>must be the same</u> as those already held for the existing holding in the said Stock.													
5	WITHHOLDING TAX ON INTEREST APPLICABLE ONLY TO RESIDENTS IN MALTA													
	I / We elect to have Fina	l Withholding Ta>	currently at	15% d	ledu	icted f	rom r	ny/oı	ur inter	rest.				
	I / We elect to receive interest Gross (i.e. without deduction of Withholding Tax). I / We hereby authorise you to inform the Commissioner of Inland Revenue of the amount of dividend paid to me / us during each calendar year.													
	In the case where the applicant/s has/have existing holding in this Fungibility Issue s/he/they must ensure that the same <u>Tax Option</u> currently applied to the existing holding in the said Stock be applied as well to the present Application.													
6	GROSS INTEREST RECEIVA	BL BY NON - RE	SIDENT AP	PLICA	NT	/S								
	NON – RESIDENT DECLARA	TION FOR TAX	PURPOSES											
	I am / We are not subject to tax as I am / we are not a Maltese resident/s for the purpose of the Income Tax Chapter 123 of the Laws of Malta. If at any time my/our residence status shall change, it shall be my/our sole a exclusive responsibility to inform you of such change forthwith. I/We further declare that I am / we are aware t a false declaration of residence is punishable by law.								e and					
	Passport Number	Country of Issue		Issu	Issue Date				Nationality					
7	PAYMENT, DECLARATIONS AND SIGNATURES													
I / We hereby undertake to pay Euro105.50 for every Euro 100 nominal of Stock and to accelesser amount that may be allotted to me/us.							o acce	pt th	e san	ne,	or a	ny		
	I/We have fully understood the contents of this Application Form, and I am/we are making this Application solely or the basis of the relevant Prospectus and subject to its terms and conditions which I / we fully accept.											ly on		
By completing and delivering an Application Form, I/We, as the Applicant(s), acknowledg process the personal data that I/We provide in the Application Form in accordance with th 2001.														
	Signature of eligible investor/s	Date Date					ID	ID Card						
	Signature of eligible investor/s						ID Card							
	Full name of MINOR'S PARENTS/LEGAL GUARDIANS If the eligible investor is a minor, the parent or legal guardian is to sign (above) and write name and surname in full in this box.													

It is the responsibility of the applicant to ensure that the information entered on the application form is correct.