


 Treasury
 Floriana

MALTA GOVERNMENT STOCK
3.3% MGS 2024 (I)
PRICE OF ISSUE €100.25 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 €100.25 for every €100 nominal of stock applied for)	
EUR								EUR	

2 DETAILS OF APPLICANT

Name/s	Mr/Mrs/Ms/Other								
Address:									
									Post Code
Company Registration No./I.D Card No.			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.

3 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: Resident <input type="checkbox"/>	Section B: Non Resident (of which): <ul style="list-style-type: none"> Monetary Union Member State <input type="checkbox"/> Other European Union country <input type="checkbox"/> Other foreign country <input type="checkbox"/>
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Section C:	
Individuals/NGOs:	Financial company:
■ Individual or Household <input type="checkbox"/>	■ Credit Institution <input type="checkbox"/>
■ Minors (Under 18 years) <input type="checkbox"/>	<i>Other financial intermediary of which:</i> ■ Collective Investment Schemes <input type="checkbox"/>
■ Non-Profit Organisation <input type="checkbox"/>	■ Insurance Company <input type="checkbox"/>
	■ Other (Exchange bureau, Licensed stockbroker) <input type="checkbox"/>
Non-financial company/Corporation	
■ Private-owned (including Partnerships) <input type="checkbox"/>	
■ State-Owned <input type="checkbox"/>	
■ Government Funds <input type="checkbox"/>	

4 INTEREST MANDATE BY DIRECT CREDIT (SEPA)

Bank	Branch																							
IBAN (International Bank Account Number)																								
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5 WITHHOLDING TAX ON INTEREST APPLICABLE ONLY TO RESIDENTS IN MALTA

- I / We elect to have Final Withholding Tax currently at 15% deducted from my/our interest.
- 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.

6 GROSS INTEREST RECEIVABLE BY NON - RESIDENT APPLICANT/S

NON - RESIDENT DECLARATION FOR TAX PURPOSES			
<p>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 Act Chapter 123 of the Laws of Malta. If at any time my/our residence status shall change, it shall be my/our sole and exclusive responsibility to inform you of such change forthwith. I/We further declare that I/we am/are aware that a false declaration of residence is punishable by law.</p>			
Passport Number	Country of Issue	Issue Date	Nationality

7 PAYMENT, DECLARATIONS AND SIGNATURES

I / We hereby undertake to pay **Euro100.25** for every Euro 100 nominal of Stock and to accept the same, or any lesser amount that may be allotted to me/us.

I/We have fully understood the contents of this Application Form, and I am/we are making this Application solely on the basis of the relevant Prospectus and subject to its terms and conditions which I / we fully accept.

By completing and delivering an Application Form, I/We, as the Applicant(s), acknowledge that the Issuer may process the personal data that I/We provide in the Application Form in accordance with the Data Protection Act, 2001.

Signature of eligible investor/s	Date	ID Card
Signature of eligible investor/s	Date	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.

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