



CENTRAL BANK
of BELIZE

APPLICATION FORM
GOVERNMENT OF BELIZE
FLOATING RATE NOTES (FRNs)

1.50% + IR Coupon Rate

1 Yr Floating Rate Notes

I/We hereby apply for par value _____ Dollars
(amount in words MUST be a multiple of \$1,000.00)

(_____) Government of Belize **1.50% + IR** Coupon **1** Yr Floating Rate Notes.
(amount in figures)

I/We undertake to pay for the same in full at a price of \$ 100.00 per one Hundred dollar par value (specified up to two decimal places) for a total value of \$ _____.

The Notes should be registered in the name of:

COMPANY NAME/

FULL NAME IN BLOCK LETTERS: _____

COMPANY REGISTRATION NO/

SOCIAL SECURITY NO: _____

COMPANY REGISTRATION DATE/

DATE OF BIRTH: _____

ADDRESS: _____

ORDINARY SIGNATURE: _____

DATE: _____

TELEPHONE NO: _____

EMAIL ADDRESS: _____

I hereby authorize you to deposit amounts due to me in respect of my holdings of Government of Belize

1.5% + IR 1 Year Floating Rate Notes to my Account Number as per the information provided below:

BANK NAME: _____

BANK ADDRESS: _____

ACCOUNT NAME: _____

ACCOUNT NUMBER: _____

SIGNATURE: _____

DATE: _____

Application should be mailed to:

Director Finance
Central Bank of Belize
P.O. Box 852
Belize City
Belize

For Official Use
Issue No: _____
Application No: _____
CSD Reg. No: _____