



CENTRAL BANK
of BELIZE

**APPLICATION FORM
GOVERNMENT OF BELIZE**

_____ % Coupon Rate

_____ - Yr Treasury Note

Assistant Manager
Investment & Reserve Management Unit
Central Bank of Belize
P.O. Box 852
Belize City

Sir/Madam:

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

(\$ _____) Government of Belize _____ % Coupon _____ Yr Treasury Note. I/We

undertake to pay for the same in full on _____.

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
_____ % _____ **Year** Treasury Note to my Account Number as per the information provided below:

BANK NAME: _____

BANK ADDRESS: _____

ACCOUNT NAME: _____

ACCOUNT NUMBER: _____

SIGNATURE: _____

DATE: _____

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