



CENTRAL BANK
of BELIZE

APPLICATION FORM
GOVERNMENT OF BELIZE

____ % Coupon Rate
____ - Yr Treasury Note

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

Sir/Madam:

I/We hereby apply for _____ Dollars (\$ _____) Government of
(Amount in words)

Belize _____ % Coupon _____ Yr. Treasury note. I/We undertake to accept the same, or any less
amount allotted to me/us, and 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: _____

OFFICIAL USE ONLY	
Issue No.	_____
Application No.	_____

I hereby authorize you to deposit amounts due to me in respect of my holdings of Government of Belize % Yr. Note to my Account Number as per the information provided below:

BANK NAME: _____

BANK ADDRESS: _____

ACCOUNT NAME: _____

ACCOUNT NUMBER: _____

SIGNATURE: _____

DATE: _____