



SPECIMEN CARD

Account No.				PHOTO
Account Name		Currency		
Account Type				
Signatory Name				
Position				
Nationality		ID/Passport No.		
Telephone		Email		
Operating Mandate	<input type="checkbox"/> Jointly <input type="checkbox"/> Separately <input type="checkbox"/> Other - Please specify below; _____			

CLIENT SPECIMEN SIGNATURES

Date:	Account Opening Officer Name:	Stamp and Signature: