

To: RESERVE BANK OF FIJI, Private Mail Bag, Suva.

Lodgement Date:	Do you currently have an outstanding investment in Fiji Government Viti Bonds? <input type="checkbox"/> YES <input type="checkbox"/> NO
Investor Type: <input type="checkbox"/> Individual(s) <input type="checkbox"/> Corporate Body <input type="checkbox"/> Trust	

Investors Details (For Individuals, Surname to be stated first):

1	Mr/Mrs/Miss/Ms (Please state clearly if acting as trustee for a minor): Residential Address: Postal Address (if different from Residential):	Telephone: Mobile: Email:	DOB: / / Occupation: Tax Identification Number (TIN)* <input style="width: 100px; height: 15px;" type="text"/> * A copy of the TIN letter/card and another valid photo ID (Voter ID, Driving license etc.) must be submitted with the tender form.
2	Mr/Mrs/Miss/Ms (Please state clearly if acting as trustee for a minor): Residential Address: Postal Address (if different from Residential):	Telephone: Mobile: Email :	DOB: / / Occupation: Tax Identification Number (TIN)* <input style="width: 100px; height: 15px;" type="text"/> * A copy of the TIN letter/card and another valid photo ID (Voter ID, Driving license etc.) must be submitted with the tender form.
3	Mr/Mrs/Miss/Ms (Please state clearly if acting as trustee for a minor): Residential Address: Postal Address (if different from Residential):	Telephone: Mobile: Email:	DOB: / / Occupation: Tax Identification Number (TIN)* <input style="width: 100px; height: 15px;" type="text"/> * A copy of the TIN letter/card and another valid photo ID (Voter ID, Driving license etc.) must be submitted with the tender form.

INVESTMENT DETAILS Minimum investment \$1,000.00/Maximum investment \$200,000.00

Terms & Fixed Coupon Rate (per annum)	Amount (\$)	Source of Funds:
Tick one: <input type="checkbox"/> 5 years - 4.00% <input type="checkbox"/> 7 years - 4.50% <input type="checkbox"/> 10 years - 5.00%		

PAYMENT:

COLLECTION OF VITI BOND CERTIFICATES:

Tick one: <input type="checkbox"/> Bank Cheque payable to "Reserve Bank of Fiji" <input type="checkbox"/> FIJICLEAR ¹	<input type="checkbox"/> Post to above address OR <input type="checkbox"/> Collect Over The Counter OR To (Bank) _____ Branch _____ for safe custody on our behalf.
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QUARTERLY INTEREST PAYMENT AUTHORITY

Bank _____ Branch _____ Bank Account Name _____

Account Type e.g. Savings/Chq account/ other etc. : _____

Bank Account Number:

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I/We hereby authorise the Registrar to pay to the above bank account, ALL interest and redemption proceeds which hereafter may become payable in respect of the above investment and to accept their receipt as a full and sufficient discharge, such order to remain in force until revoked by me/us in writing.

I/We hereby apply for Fiji Government Viti Bonds upon the terms and conditions set out in the **Viti Bond Prospectus dated 21 August 2019**.

I/We agree that any personal information about me/us received by the Registrar may be used to offer or provide me/us with information concerning securities issued by the Fiji Government.

PLEASE SIGN HERE

1	2	3
Date and Company Stamp (if applicable)	Date	Date

FOR USE BY THE REGISTRAR

Custodian Initials		Date	Comments			
1	2	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>				

¹ Transfer of funds can be made from any Commercial Bank through the FIJICLEAR payment system with the below details:
 SWIFT Code: RBFJFJA
 Beneficiary Name: Fiji Government Central Account
 Beneficiary Account No.: 31501
 Narration: Purchase of Fiji Government Viti Bond