MALTA STOCK EXCHANGE

DC Ref: _____/___

Direct Credit Instructions Form

MSE Number: | | | | | | | | | | | Date: _____

	Primary Holder	Joint Holder
Full Name:	_____	_____
Tel/Mobile Number:	_____	_____
ID Card Number:	_____	_____

Until further notice please pay all Interest / Dividend due on my/our securities listed below directly into the Bank

1) All Current and Future Securities ☐ 2) All Current Securities ☐ 3) The Following Named Securities: ☐

ISIN	Security Name
_____	_____
_____	_____
_____	_____
_____	_____

Name of Bank: _____ BIC: _____

IBAN: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

Designation of Account: _____

For foreign banks please provide the full address in the field below, please note non-SEPA payments are not accepted.

Address: _____

Please Sign Here: *

	Primary Holder	Joint Holder
Signature:	_____	_____
Full Name:	_____	_____

****In case of minor, a parent or legal guardian is required to sign.***

Witness to Identity:*

Full name of witness in BLOCKS: _____

ID Card Number: _____ Signature: _____

Rubber-stamp of witness: *(If Applicable)*

Profession: _____

Warrant no: _____

(*) Witness must be a professional or an officer/director at an MFSA (or other reputable jurisdiction regulatory authority) licensed entity. Professional means a member of the legal/notarial or accountancy professions holding a valid warrant. Professionals from outside Malta need to have their signature apostilled.

Process Date: _____ Processed By: _____ Verified By: _____

For MSE Use
CSD012/2026/01

The Malta Stock Exchange Data Protection Policy Declaration is available at www.borzamalta.com.mt

Original Form is the be sent to the Malta Stock Exchange plc - Garrison Chapel, Castille Place, Valletta, VLT 1063