## GIBRALTAR SAVINGS BANK Form of Order

| Depositor's Book No  |
|--|
| To the Director of the Gibraltar Savings Bank  |
| I, the undersigned, do hereby authorise and direct   |
| of   |
| the bearer of this order to receive on my account the sum of:  |
| £ (in words)   |
| For which notice of withdrawal was given by me on the day of   |
| Date   |
| Full Name Signature  |
| The Form of Order requires to be witnessed. Such witness, who must be either a Member of the Gibraltar Parliament, Justice of the Peace, Minister of Religion, a professionally qualified person (for example Doctor, Lawyer, Teacher), Bank Officer, Established Civil Servant, Police Officer or a person of similar standing who has known you personally for at least two years and is a resident of Gibraltar, should not be a person named as payee in the Nomination form. A relative should not countersign.  # If the account holder is resident abroad the signature must be verified by the British Consul or some other Constituted Authority of the place in which he/she resides, where the depositor is serving in Her Majesty's Forces, by a Commissioned Officer. |
| Witnessed by: -  |
| Signature Address  |
| Full Name  |
| Occupation   |

## Data Protection Act 2004

Under the Data Protection Act 2004, the Director of the Gibraltar Savings Bank reserves the rights to collect, store and process personal data for the purpose of providing you with the service(s) that you have requested. This data will remain on file/computer records for as long as administratively necessary and will then be destroyed. Personal information about you or your investments is private and confidential and will not be disclosed to anyone not connected with the provision of this service, unless you give us your consent, or the law permits or requires it. If you want to see your records, please write to the Data Protection Officer, Treasury Department, 206/210 Main Street, Gibraltar, providing us with your full name, current and previous address and account number(s).