

TO: Director
Banking Department
Central Bank of The Gambia
1-2 ECOWAS Avenue
BANJUL, THE GAMBIA



**APPLICATION FOR 2-YEAR GAMBIA
GOVERNMENT TREASURY BONDS**

TYPE OR PRINT IN INK ONLY – TENDERS WITH ALTERATIONS WILL NOT BE ACCEPTED

1. BID INFORMATION
Face Value:
D _____ *Amount in words*.....
(Sold in units of D50, 000)*Dalasis*

ISSUE DATE

OFFICIAL USE ONLY

2. TERM OF THE BONDS

Minimum Bid Amount: D5,000,000

Tenor: 2 Years

Yield: Please quote your preferred yield
(Up to two decimal points)

3. NAME Please Type or Print

4. ADDRESS

5. TELEPHONE _____

ACCEPT

REJECT

REASON

6. PAYMENT INFORMATION

Once an allotment of stock has been made, payment must be made in full by direct debit through RTGS in favor of The Gambia Government on the issue date. The allotment letter will not be issued until the amount debited has been realized.

7. AUTHORISATION *(Original Signature Required)*

Tender Submission: I submit this tender pursuant to the Guidelines for Bonds, General Conditions of Issue and Redemption and the applicable offering announcement. I certify that all the information provided on this form are true, correct and complete.

Signature(s) Date