

SIGNATURE VERIFICATION CARD

Account Name _____
 Address _____

 Tel. No./s _____ Signature updated _____
 Fax No./s _____ Contact Person _____
 Tax Identification No. _____

Type of Transaction/s: Loans TR Import / Export Market Risk Others _____

Signature Required:
 Any one Any two All Combination (See attached Secretary's Certificate)

Authorized Signatures: (PLEASE SIGN 3X)

I. Printed Name _____ <small style="display: block; text-align: center;">Last Name First Name Middle Name</small> Title/Nature of Work _____ Nationality _____ Date of Birth _____ Place of Birth _____ Present Address _____ Permanent Address _____ Contact No. _____ Source of Funds _____ Tax Identification No. _____ SSS/GSIS No. _____	II. Printed Name _____ <small style="display: block; text-align: center;">Last Name First Name Middle Name</small> Title/Nature of Work _____ Nationality _____ Date of Birth _____ Place of Birth _____ Present Address _____ Permanent Address _____ Contact No. _____ Source of Funds _____ Tax Identification No. _____ SSS/GSIS No. _____
Signature 1	Signature 1
Signature 2	Signature 2
Signature 3	Signature 3

By affixing the above specimen signature/s, I/We hereby acknowledge and agree to be bound by the appropriate Terms and Conditions governing transactions with the Bank. I/We also undertake to update my/our specimen signature/s every five years or sooner at the discretion of the Bank, or upon any change of signing authorities on file with the Bank.
 I/We certify that the information stated above are true and correct. I/We agree to fully indemnify the Bank or any of its authorized representatives against any damages, cost and expenses, losses or obligations arising from any fraudulent information or misrepresentation made on our part.

AUTHENTICATION

This is to certify that the signature/s appearing on this card are the genuine signature/s of the duly authorized signatory/ies for transactions of _____
 with the Bank, based on the resolution executed by the Board of Directors of the said company on _____

 Corporate Secretary

Manager	Staff

DGM	Dept. Head	AO