

VOLUNTARY ORGANISATION - INFORMATION REQUEST

Branch/Unit:

Date:

Dear Sir/Madam,

Voluntary Organisation Name:

REGISTERED ADDRESS

Building/Office:

Street:

City:

Post Code:

Country:

Entity Registration No.:

We, in our capacity as authorised administrators of the above captioned Voluntary Organisation, hereby authorise APS Bank to request from the Office of the Commissioner for Voluntary Organisations information about the said entity and the persons representing it.

We understand that this information is required by the Bank for compliance purposes and that such information may be requested from the Commissioner for Voluntary Organisations at any stage of the relationship of the said entity with APS Bank.

Yours faithfully,

Name & Surname

ID/Passport No.

Signature

Role within the Entity

Name & Surname

ID/Passport No.

Signature

Role within the Entity

