

Annual Custody Account Statement 24 Registration CEU File Service

Tel.: +49-(0)69-211-11590				Client (account	holder)	
Fax: +49-(0)69-211-611590 Email: connect@clearstream.com				Company name		
				Functional conta	act person (first na	ame and surname)
				Telephone	Fax	
				Email		
				Technical contac	ct person (first na	me and surname)
				Telephone	Fax	
Client's CEU account no.	Client's additiona	al CEU account nu	ımbers	Email		
Technical receiver's CEU account no.			SWIFT		_	
Registration of authorised pe						
Explanation: Please decide wheth and decoding (New user only for Filservice users within your compopen the file. New user only for download	download and decr	yption). An existii	ng user can be file, therefore	authorised to deco	de the file (see be unauthorised use	elow). All CEU
Company name			Department			
Name (first name and surname)			Male Fe	emale		
Street			Post code/Town			
Country			Email			
Telephone			Fax			
We will use an existing CEU F Authorised person only for decry		nd like to reques	t the respectiv	ve secured passwo	rd for this user o	nly.
Name (first name and surname)			Male Fe	emale		
Department			Email			
Telephone			Fax			
Date		-	Two signature	s of the client and n	ames in printed o	characters