

## Annual Custody Account Statement 24 Registration CBF Fileservice

Tel.: +49-(0)69-211-11590				Customer (acco	ount holder)		
Fax: +49–(0)69–211-611590 Email: connect@clearstream.com				Company name			
				Functional cont	act person (first na	ame and surname)	
				Telephone	Fax		
				Email			
				Technical conta	ict person (first na	me and surname)	
				Telephone	Fax		
Customer's CBF account no. Customer's additional CBF accou			nt numbers	Email			
Technical receiver's CBF account no.			SWIFT		_		
Registration of authorised pe	rcon						
<b>Explanation:</b> Please decide wheth and decoding (New user only for a Filservice users within your compopen the file.	download and dec	ryption). An existi	ng user can be	authorised to dec	ode the file (see be	elow). All CBF	
New user only for download			New user o	w user only for download and decryption			
Company name			Department				
Name (first name and surname)							
Street			Post code/Town				
Country			Email				
Telephone			Fax				
■ We will use an existing CBF F Authorised person only for decry		nd like to request	t the respective	secured passwo	rd for this user on	lly.	
Name (first name and surname)			Male Fe	male			
Department			Email				
Telephone			Fax				
Date			Two signatures	of the customer a	and names in print	ted characters	