

Order form  
File Transfer  
52A KVCB – CASCADE-RS

Tel.: +49-(0)69-211-11590  
Fax: +49-(0)69-211-611590  
Email: [connect@clearstream.com](mailto:connect@clearstream.com)

**Customer (account holder)**

Company name

Functional contact person (first name and surname)

Telephone

Fax

Email

Technical contact person (first name and surname)

Telephone

Fax

Email

Customer's CBF account no.

Customer's additional CBF account numbers

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Technical receiver's CBF account no.

**Request for RS Queries (MT571 proprietary format).**

(internal J%26A390)

**Connectivity tool used**

Connect: Direct

NJE

Hob FT

**Address of the technical receiver:**

Date

52A/02.2021

Two signatures of the customer and names in printed characters