APPLICATION FOR TREASURY BILLS

Application No.		
(For Office use only)	Address	
	Tel:	
	Email:	
	Date	
The Accountant General Treasury Department 1st Floor National Housing Building		
Dear Sir,		
In accordance with the terms of the Gov Treasury Bills Issue No, I/W	e apply	for Treasury Bills to the amount of dollars (\$) to be issued on
1. I/We undertake to accept the same or an	y less amo	ount that may be allotted to me/us and to
pay cent or		
2. Utilize the non-competitive window available (delete whichever does not apply)	ailable to	individuals and accept the assigned rate
I/We further undertake to pay the Accountamentioned sum of	s for ever	y One Hundred Dollars or the amount
I/We wish the name(s), as indicated below me/us.	, to be ins	erted on any Bills that may be issued to
Yours faithfully,		
• /	S	Signature(s) }
Name(s) in full		

NOTE: EACH TENDER must be for not less than \$1,000.