	FIDE	ELITY BANK
SPECIMEN SIGNATURES		Date: DD MM YY
Name Account No Address		
Name(s) in full Please write name in the box(es) below	Signature(s) Please sign entirely within the box(es) below USE BLACK INK/PEN ONLY	Passport-size photo
		Approval

	Signature
Branch Manager	Signature
Relationship Manager	Signature
Signature Mandate	
Remarks	
Company Stamp	Diagramula automa an mataura d
	Please rule out space not used.