

AUTHORIZED SIGNATORY UPDATE - CORPORATE

	New Authorized Signatory				For Bank Use Only				
Instruction Type		Signature Update of Existing Authorized Signatory				mer No.			
		·	Existing Authorized	au Signatory B		Branch No.			
1. Basic Customer Information									
Full Legal Name English		1							
Account Name	Account Name English								
2. Authorized Signatory Details									
Full Name (First Na	me, Middle Na	ame, Last Name)							
Do you hold prominent public position in the organization?			Philippines / a Foreign State / an Internation			onal	YES	□NO	
			stee; Primary Officer (i.e., President, Treasure g/owning at least 20% of the voting stock?			er [YES	□NO	
Contact no.					(CIF (to be filled	l by bank)		
Identification Document		Туре				ID Issue Date		YYYY/MM/DD	
		No.	1			ID Expiry Date		YYYY/MM/DD	
Place of Birth					[Date of Birth/F	Registration		
Philippine Resident status			Resident	☐ Non-resi	dent 1	Nationality/Cit	izenship		
Position			Bus			Business/Indu	usiness/Industry		
(Current) Residen	itial /Regist	ered Address							
Specimen Signatures (Sign 3 times)									
1.			2.			3.			
For Bank Use Only									
Relationship Team - Acknowledgement									
Processed by AA/ARM and RM			Date (mm/dd/yyyy) Approved by Busin			ess neau		Date (mm/dd/yyyy)	
Signature Over Printed Name and Staff ID				Cinnature Over Drinted Name and Ctaff IF			# ID		
			Signature Over Printed Name and Staff ID				ח וט		
	vice lea	m - For Data	Input (Sign on top of printed nam				D () () ()		
Maker			Date (mm/dd/yyyy)	Checker				Date (mm/dd/yyyy)	
Signature Over Printed Name and Staff ID				Signature Ove	er Printed Name and Staff ID				