Please submit this form to the nearest Citibank Branch.

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## JOINT HOLDER DEPOSIT CONSENT FORM

Date	:	D D M M Y Y Y Y	
Account Number	:		
Account Holder N	Name :		
For accounts with	h signature ı	rule Either or Survivor,	
		ature withdrawals of fixed/term & Multi deposits placed and, ule of 'Either or Survivor'.	or proposed to be placed shall be paid by
Holder 1	:	Name	Signature
Holder 2	:	Name	Signature
Holder 3	:	Name	Signature