



HELIX SECURITIES LIMITED
SIGNATURE MANDATE CARD

CLIENT NAME	Acct No	Branch
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CONTACT ADDRESS

MAILING ADDRESS

EMAIL

PHONE NO(S)

MANDATE

Name	Name	Name	Name
Sign.	Sign.	Sign.	Sign.
Position	Position	Position	Position
Class	Class	Class	Class

Banker's Name & Address:

Account No: _____ Date a/c Opened: _____

Authenticated By Name	Signature	Date
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