

Date _____

CERTIFICATION REQUESTMaybank ATR Kim Eng Securities, Inc
9/F Tower One & Exchange Plaza
Ayala Triangle, Ayala Avenue
Makati City, Philippines 1226Telephone +63 2 625 5888
Facsimile +63 2 846 2611

I/we would like to request for the following certification/s listed below (Please check).

- Visa Application, specify for what embassy to address to: _____
- General Purpose, specify reason: _____
- Certified true copies of ledgers, specify period: _____

Please specify any other information needed on the certification: _____

DELIVERY METHOD (please choose one):

- Pick up
- Scan and email to my registered email address
- Mail courier to be sent to

I/we understand that certification requests may be processed in one to two business days after receipt of this request.

I/We authorize Maybank ATR Kim Eng Securities Inc. to debit my account for the following charges:

- Courier charges - local charges depending on the location while international charges depending on weight and location.
- Processing fee of P100 pesos per certification

Client's Signature over Printed Name

Client Reference No.: _____

ID Type and No.: _____

AUTHORIZATION FOR REPRESENTATIVE

I/We hereby authorize my/our representative whose printed name and specimen signature appears below, to receive the proceeds of this withdrawal in my/our behalf.

Representative's Printed Name_____
Representative's Signature_____
Client's Signature*Note: Valid identification from both the customer and his representative is required.*