OSLO CLEARING

For the Collateral Agent:

| Collateral released |
| --- |
| Sign: |
| Date: |

# COLLATERAL WITHDRAWAL FORM

Clearing participants name: _____

Clearing participants member ID: _____

Total collateral value to be released (approx. NOK): _____

Indicate how much and what type(s) of collateral to be released:

**Cash**

Currency: _____ Amount: _____

From bank : _____ BIC:_____ IBAN: _____

To bank:_____ BIC: _____ IBAN : _____

**Financial instruments**

| **Custodian** | **Collateral Account** | **ISIN/Name of instrument (opt.)** | **NOK value (nominal amount)** |
| --- | --- | --- | --- |
| | | | |
| | | | |
| | | | |

**Authorized signature:**

.....

Date Name in capital letters Signature

**Approved by Oslo Clearing:**

.....

Date Name in capital letters Signature