

Date

BOZ FORM RD 1

The Assistant Director Market Operations Bank of Zambia P. O. Box 30080 LUSAKA

Dear Sir

APPLICATION FOR REDISCOUNT TREASURY BILLS.

I / we wish to rediscount our stock of Treasury bills.

Tender Number	:
Date of issues	:
Maturity date	:
Amount Available	:
Amount to be rediscounted	:

Mode of receiving the proceeds

Note

Part 'A' should be completed by Commercial banks only Part ' B' should be completed by individual & non Bank Financial Institution only

Applicant Details Name (s)	
Signature (s)	
For official use only	
Bid Price	Issues Number
Original Nominal	Original Cost
Checked by	Approved by