

Clearing Member's Mandate for LME Clear Limited Secure Payments System (SPS)

Name of Settlement Bank:	
Address - Account Holding Branch:	
Name of Relationship Manager:	
Email Address:	
Contact Number:	

I / We authorise you, until further notice in writing, to debit my/our account(s) as listed below with unspecified amounts from time to time at the instance of LME Clear Limited using BIC LMECGB2L without further reference to me / us.

In acting on this Mandate, you may rely, without qualification, upon the information provided to you by LME Clear Limited in whatsoever form this information is submitted to you.

Currency (USD, GBP, EUR, JPY): <i>(one form to be completed for each currency)</i>	
Settlement Bank BIC:	
Account Number to be debited:	

Signed for and on behalf of:

Name of Clearing Member: _____

Clearing Member Mnemonic: _____

Authorised Signature: _____

Print Name: _____

Date: _____

**When completed and signed, this original form should be sent to your Relationship Manager at the above mentioned Settlement Bank and a copy emailed to: imeclearing@lme.com
Please also confirm by email to imeclearing@lme.com when the Direct Debit Authorisation has been set up over the account by the Settlement Bank.**