

APPEAL ON CSDR PENALTIES

Participant:

Code:

Name:

Penalty and Transfer Identification:

Penalty ID:

Transfer ID:

ISIN:

Appeal:

Reason for appeal*:

Expected amount of penalties*:

Currency:

Expected penalty fee algorithm*:

Date

Signature of the participant's authorized person

CSD Response:

Acceptance of appeal:

Yes

No

Reason:

Date

Signature of the CSD's authorised person

*) mandatory field