LATVIJAS BANKA
EIROSISTĒMA

TARGET2 form for collection of Static Data
– Contact Items –

A,B	**BIC:**	**TEST BIC:**	
C,D,E	☐ **New**	☐ **Modify**	☐ **Delete**
F,G,H	○ **Production**	○ **Test & Training**	**Date:**
I,J	**Ref:**	**rel. Ref:**	
K,L	**Activation date:**	**Responsible CB:** - Select one Entry -	

	1. Contact Item	Revision Marks for CB
11	Function Title: - Select Function Title -	Enter Contact Item
12	First Name:	
13	Last Name:	

	2. Contact Information		
14, 15	Contact Type	Contact Value	Enter Contact Item
	- Select -		
	- Select -		
	- Select -		
	- Select -		
	- Select -		
	- Select -		
	- Select -		
	- Select -		
	- Select -		
	- Select -		

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☐ **New**	☐ **Modify**	☐ **Delete**
BIC:	**TEST BIC:**	**Activation date:**

The Undersigned declare(s) to have the full capacity and authority to execute the TARGET2 form for and on behalf of the Participant requesting activation of the registration.

Date, Name(s) Signature(s)

Form No 1015

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