Guaranty Trust Bank (Gambia) Ltd

Date: ……

The Head of TSU
Guaranty Trust Bank (Gambia) Ltd.

REACTIVATION OF ACCOUNT

Dear Sir/Madam,

Kindly take this letter as your authority to activate My / Our account

Account Name: _____

Account Number: _____

Yours faithfully,

Signed:

_____	_____
Name of Account Holder	Signature of Account Holder
_____	_____
Name of Account Holder	Signature of Account Holder