

Monte Titoli

DISASTER RECOVERY SIMULATION

References of participants in the Disaster
Recovery Simulation - 3 December 2016

December 2016 Version



London
Stock Exchange Group

Contents

December 2016 Version

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1.0 References of participants in the Disaster Recovery Simulation

ABI Code:		CED Code:		Code assigned by MT:	
ABI Code: this is the code provided by the ABI (e.g. for MT 12930) CED Code: this is the code provided by SIA, generally assigned to a trader/settlement agent or in any case to any party adhering to the X-TRM services (e.g. for MT 617) Code assigned by MT: this is the code provided by Monte Titoli for companies not coded by the ABI (e.g. Issuing Company which is NOT a banking entity).					
Registration Description:					
Name:					
Telephone Number:					
Mobile Number:					
E-mail Address:					
Name:					
Telephone Number:					
Mobile Number:					
E-mail Address:					
Name:					
Telephone Number:					
Mobile Number:					
E-mail Address:					
Name:					
Telephone Number:					
Mobile Number:					
E-mail Address:					

The notifications relating to the progress of the Simulation, the start and end of the activities shall be disclosed through an email to the addresses provided.

Signature, _____

_____, [date] ____ - ____ - ____



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2.0 References of participants in the case of actual activation of the Disaster Recovery

ABI Code:		CED Code:		Code assigned by MT:	
<small>ABI Code: this is the code provided by the ABI (e.g. for MT 12930) CED Code: this is the code provided by SIA, generally assigned to a trader/settlement agent or in any case to any party adhering to the X-TRM services (e.g. for MT 617) Code assigned by MT: this is the code provided by Monte Titoli for companies not coded by the ABI (e.g. Issuing Company which is NOT a banking entity).</small>					
Registration Description:					
Name:					
Telephone Number:					
Mobile Number:					
E-mail Address:					
Name:					
Telephone Number:					
Mobile Number:					
E-mail Address:					
Name:					
Telephone Number:					
Mobile Number:					
E-mail Address:					
Name:					
Telephone Number:					
Mobile Number:					
E-mail Address:					

Signature, _____

_____, [date] ____ - ____ - ____



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