

*In original by mail to*

OeKB CSD GmbH  
attn. Accounts & Settlement  
Strauchgasse 3  
1010 Vienna  
Austria

## Form – Systematic delivery failure (before a suspension)

According to article 7 (9) CSDR and article 39 Commission Delegated Regulation (EU) 2018/1229

Information provided by OeKB CSD:

---

**Name of participant:**

---

**Number of days 15% lower than settlement efficiency rate of SSS:**

---

Information to be filled in by the participant and submitted to OeKB CSD within one week:

---

**Observations:**

---

By signing this form, we confirm, the accuracy of the data provided

-----  
Place, Date

-----  
Place, Date

-----  
Authorized Signature

-----  
Authorized Signature

-----  
Name in Capital Letters

-----  
Name in Capital Letters