

UKLA ELECTRONIC TRANSFER PAYMENT FORM

- PLEASE FAX THIS FORM TO THE UKLA ON 020 7066 8364 UPON COMPLETION OF ANY BACS/CHAPS PAYMENT IN RESPECT OF UKLA FEES.
- BACS/CHAPS payments must be referenced UKLAAPPFEE+NAME OF PAYER+NAME OF ISSUER
- UKLA Bank details are as follows:-

Account Name : FSA- UKLA Collection Account
 Bank: Lloyds Bank, City Office, Monument Street, London, EC3V 9JA
 Account Number : 01704015
 Sort Code : 30-00-02
 BIC Code : LOYDGB2LCTY
 IBAN : GB29 LOYD 300002 01704015

Please complete every box below.

Date of this form	09 May 2011	
Case Reference(s) (RA/....)* or Issuer name & brief details of transaction	Supplement for EMTN Programme €3,000,000,000 - for Spar Nord Bank A/S	
Payment being made now	£ 550.-	
Date of Payment (DD/MM/YY)* *This should be the value date of the electronic transfer.	09 / 05 / 2011	
BACS/CHAPS Payment Reference (as it will appear to UKLA)	FT11050906990900	
Breakdown of payment	Vetting Fees	£ 550.-
	Application Fees	£
	Tranche Fees	£
	Eligibility Fees	£
	Sponsor Application Fees	£
	Other Payment	£
Contact name relating to payment	Jan F. Poulsen	
Contact Telephone Number	+45 96344209	
Comments	Fees for Supplement	

IF YOU HAVE ANY QUESTIONS REGARDING THIS FORM PLEASE CONTACT THE LISTING APPLICATIONS TEAM ON 020 7066 8333 - OPTION 3.