

APPLICATION FOR PURCHASE OR SALE OF FOREIGN **CURRENCY**

Please complete in Block Capitals Use one set of forms for each transaction

| Application For: | | | Draft | | Sw | ift | | | | - | | | | | |
|------------------|-------------------|----|--------|---------|----|-----|----|------|-------|---|--|--|--|--|--|
| | | | Transf | er to F | CA | | Ot | hers | | | | | | | |
| 1. | Draft | | | | | | | | | | | | | | |
| | No. | | | | | | | | | | | | | | |
| | On | | | | | | | (E | Bank) | | | | | | |
| 2. | | | | | | | | | | | | | | | |
| | (Bank) | | | | | | | | | | | | | | |
| | (Branch) | | | | | | | | | | | | | | |
| | (Branch) No | o. | | | | | | | | | | | | | |
| | (Swift Code | e) | | | | | | | | | | | | | |
| | Intermediary Bank | | | | | | | | | | | | | | |
| | (Bank) | | | | | | | | | | | | | | |
| | (Branch) | | | | | | | | | | | | | | |
| | (Routing) N | о. | | | | | | | | | | | | | |
| | (Swift Code | e) | | | | | | | | | | | | | |
| Foi | Office Use | | | | | | | | | | | | | | |

| Finacle | | |
|-----------|----------|--|
| Input | | |
| Authorise | | |
| Message | SWIFT | |
| Input | | |
| Verify | | |
| Authorise | | |
| Position | Reported | |

| Office Use Copy | | | | | | /at l | Reg | No. | C08 | 068 | 901 | 113 | Curren | cy: | | USD | | ZAF | 2 | JPY |
|---|---------------|--------|-------|--------|--------|--------|---------|---------|------------|---------|-----|-----|---------|----------|---------------|--------|---------------|--------|-------|----------------------|
| Date: D D | MM | Υ | Υ | Y | Y |] | | | | | | | | EUR | | INR | | GBF | | BWP |
| Applicant | | | | | | - | | | | | | | Amoun | it in wo | ords: | | | | | |
| Full Names: | | | | | | | | | | | | | | | | | | | | |
| Physical Add: | | | | | | | | | | | | | | | | | | | | |
| Contact No.: | | | | | | | | | | | | | | | | | | | | |
| ID/Passport No: | | | | | | | | | | | | | | | | | | | | |
| Purpose of Transa | ction: | | | | | | | | | | | | R | ate An | proved | _ | Сигг | ency | | Amount |
| Registration No: | | | | | | | | | | | | | | | Ref. No. | | | | | |
| Country of Reside | nce: | | | | | | | | | | | | | | | | | Ra | ate | |
| Country of Incorp | oration: | | | | | | | | | | | | | | | | Pula | a Amou | Int | |
| Branch No.: | | | | | | | | | | | | | | | | | Co | mmissi | on | |
| Date of Birth: | DD | Μ | Μ | Υ | Υ | Υ | Y |] | | | | | | | | | | Posta | ge | |
| Nationality: | | | | | | | | | | | | | | | | | Other Changes | | | |
| Acc No.: | | | | | | | | | | | | | | | | | | VAT 12 | 2% | |
| Beneficiary | · · | · | | | | • | | · | <u>^</u> | | | | | Mana | iger | | | То | tal | |
| Full Names: | | | | | | | | | | | | | State P | recise | Purpose | of Pay | ment | | | Transactio |
| Postal Add: | | | | | | | | | | | | | | | | | | | | (seee revers copy |
| Date of Birth: | DD | Μ | Μ | Y | Y | Y | Y | 1 | | | | | | | | | | | | |
| ID/Passport No: | | | | | | | | | | | | | | | | | | | | |
| Nationality: | | | Ì | | | | | İ | | İ | | | | | | | | | | |
| Country of Incorp | oration: | | İ | | | | | İ | | İ | | | | | | | | | | |
| Registration No: | | | Ì | | | | | Ì | | Ī | Ì | | Value D | ate: | DD | MN | 1 Y Y | ΥΥ | Y | |
| Physical Add: | | | | | | | | | | | | | Foreigr | n Bank | Charges | : | Our | • | E | eneficiary |
| Contact No.: | | | | | | | | | | | | | | | | | Shar | ed | | |
| Type of Business: | | | | | | | | | | | | | | E | Bank Star | mp | | | Signa | ture Verified |
| Acc No.: | | | | | | | | | | | | | | | | | | | AML | Checked |
| ISBN No.: | | | | | | | | | | | | | | | | | | | Fund | s Sufficiency |
| Instruction and Condition | | | | | | | | | | | | | | | | | | | | |
| Please transmit the ab understood that at you any country of any other | ır discretion | n, you | may u | se the | e Tele | x Syst | tem o | r othe | | | | | | | | | | | | |
| I/We release and indemnify you or your Correspondents from and against the consequence of their failure to receive the message and of any regularity, delay, mistake, telegraphic error, | | | | | | | | | | | | | | Siana | ture Verified | | | | | |
| omission or misinterpretation that may cause and form and against any loss which may through our Correspondents retaining the funds, should you Correspondents deem such retention expedient, pending confirmation of the identity of any person or of the above instruction by | | | | | | | | Check I | Perforr | ned by: | | | | | | | | | | |
| letter or otherwise. It is understood and agreed that all risks including exchange risks arising out of or consequent on the issue of this transfer are to be borne by me/us alone. | | | | | | | Call ba | ck conf | irmed w | ith: | | | | | | | | | | |
| I/We declare that the confirmation given in this form is true of the best of my/our and belief. I/We also declare that the funds involved are not proceeds of illegal trar | | | | | | | Numbe | r used | for Call b | back | | | | | | | | | | |
| I/We authorise you to del | | | | | | | | | - | | | | Time: | | | | Date | : D | DN | |
| | | | | | Γ | | | | | | | | Proces | sed by: | | | Ducc | | | · [11] 1 [1 |
| Signature | | | | | | 00-1 | | | | | | | 110003 | 223 Dy. | | | | | | |
| Signature | | | | | 210 | gnat | Lure | | | | | | | | | | | | | |

Form E 1.

Transaction Code (seee reverse of last сору)

YY