



LOCAL ELECTRONIC FUNDS TRANSFER FORM

(PLEASE FILL IN DETAILS IN CAPITAL LETTERS)

Branch: _____ Date: _____ Time: _____

Type of Service: (Tick where applicable)

RTGS SWIFT Transfer (Same Day Delivery)
(RTGS – Real Time Gross Settlement)

Normal EFT (Next Day Delivery)
(Amounts Not exceeding Ksh.1,000,000/= Only)

SENDER'S DETAILS

Sender's Name: _____

Sender's Account Number: _____

National ID/Passport Number: _____ Contact Details: _____
(Note this is required for Non-Account Holders Only)

Currency: _____ Amount In Figures: _____

Charges Amount: _____ Total Amount In Figures: _____

Total Amount In Words: _____

Payment By: *(Cash/Cheque/Debit Account/Other:)* _____

Purpose Of Transfer: _____

BENEFICIARY DETAILS

Beneficiary's Name: _____

Beneficiary's A/c Number: _____

Bank Name: _____

Branch Name: _____

Reference (if any): _____

Sender's Signature(s): (1) _____ (2) _____ (3) _____

OFFICIAL USE ONLY

Signature of Person Verifying Details: _____

Authorized Signatory: _____ SWIFT Reference Number: _____