SWIFT TRANSFER APPLICATION FORM

(PLEASE FILL IN DETAILS IN CAPITAL LETTERS)

Branch:		Date:	
SWIFT Reference Number:	:		
APPLICANT'S DETAILS			
Ordering Customer:			
Customer A/C No:			
			Rate:
Charges:	Total KSHs:		
Amount In Words:			
Payment Method: (Cash / Cheque / Debit A/C / Other):			
Purpose of Remittance:			
PAYMENT DETAILS			
Beneficiary's Name:			
Beneficiary's Address:			
Beneficiary's A/C No:			
Intermediary's Bank Name:			
Intermediary's Bank Code:			
Reference (if any):			
etc. It is understood that the	e relative remittance is to be tached to you or your agent	e sent by you or your corresp ts for any loss caused by en	ion in exchange rate and/or bank charges condents or agents at my/our risk and that rors, omissions, interruptions, and delays
Applicant Signature:			
OFFICIAL USE ONLY			
Manager's Signature:		Officer's Signa	ature: