|  |  |  |  |
| --- | --- | --- | --- |
| MONEY TRANSFER / REMITTANCE FORM | | | |
| \*Date: | \*Order Number: |

**Beneficiary Details**

|  |  |
| --- | --- |
| Remittance Country |  |
| \*Name |  |
| \*Account/IBAN Number |  |
| \*Address |  |
| E-mail |  |
| Telephone Number |  |
| \*Bank Name |  |
| \*Bank Address |  |
| \*Swift Code |  |

**Transfer Details**

|  |  |
| --- | --- |
| \*Transaction Amount |  |
| \*Remittance Currency | Euro  GBP  USD  AED |

\* Please complete all mandatory fields to process your request.