

## طلب حوالة تلغرافية APPLICATION FOR TELEGRAPHIC TRANSFER

م الفرع Branch Name				]								Date			18/02	2/20	023				į	التاريخ					
Account Title/Name	KHA	KHAIZRAN ALTHHABI KITCHNS AND REST EQUIP TR																									
Account Type	CORPORATE																										
Debit Account Number	3	رقم حساب الخصم 1   0   9   0   7   0   9   8   8   0   7   3																									
TT Currency	عملة الحوالة EUR						moun	t		حوالة	مبلغ الـ															14	1,220
Debit Currency	AED	عملة الخصم						unt		خصم	او مبلغ الد																
Amount in Words	FOUR	TEEN T	HOUS	AND TV	VO HUI	NDRED .	TWENT	Y EUR	os																		
MANDATORY BENEFIC	علومات المستفيد الالزامية															معلوما											
Beneficiary Name (Please provide full name)	ABRHIM AKAOUACH ELBOUZIANI																										
Beneficiary's Account Number/IBAN	E S 5 0 2 1 0 0 3 5 0 4 8 4 2 1 0 1 1 0 4 0 0 7																										
Beneficiary Address	PASTORETA,1																										
يرجي تحديد الغزان الكامل) (Please provide complete address including country and area/zip code) (البريتي)																											
Beneficiary's Bank Name	CAIXABANK																										
Beneficiary Bank's	PASTORETA,1																										
Address							02 RI	EUS									SPA	IN									
DETAILS (TICK AS APPLICA	I)											(	النى	ة في الا	ت الملازم	ليباتا	يتزويد ال	، وقم د	ا ينطيق	فتر كما	ل (د	التفاصي					
IBAN Number (Mandatory as required for country/currency	Sort C	كود البنك التحويلات - Sort Code - GBP الجنب الإسترايني IFSC Code - INR											رمز IFSC - الروبية الهندية														
الأدامي ويتطلب الدولة / المسلة ) required for country/currency)   Fed wire/ABA - USD\$  Fed wire/ABA - USD\$							Transit/Inst Number - Transit/Inst Number - DSB Number ALIF											D\$ - BSB Number									
	0 4		CAD\$		_		دولار هدي									ولاز أسترائي								دولار اسا			
E S 5 0 Swift/Routing Code	2   1	0	0	3	0   5 رمز السويف	4	8	4	2	1	0	1	1	0	4	0	0	<u>'  </u>	7		<u></u>	<u> </u>	<del> </del>	╪	<u> </u>		
of Beneficiary Bank	С	A	I	Х	E	s	В	В	Х	Х	х																
CHARGES (SELECT OF	Our	s			حسابنا	`													ā)	تر واحد	<u>i)</u> (	الرسوء					
Correspondent/Intermed Bank Details																											
رمز البنك المراسل/ Correspondent Bank Routing رقم المحساب Code/Account Number																							T				
Purpose of Remittance الغاية من التحويل							-GO0	DDS	BOU	GHT (	OR SO	DLD			<u> </u>												
Special Instructions/Clier	<u> </u>																										
(if any)	9																										
Deal Reference	سعر الصرف Exchange Rate																										
Cross Border Transactio	רא																										
Remarks/Additional deta about Purpose of Payme	ملا الدة																										
							Please be informed that the Bank shall endeavour to contact you at the phone number(s) registered with the Bank to verify the details provided in this application. In the event that such call was not answered or the details provided in this application. In the event that such call was not answered or the details not verified, the Bank reserves the right to keep the application on hold without processing the transfer request without any liability on the part of the Bank.  All charges, commissions and fees are exclusive of Value Added Tax or any other similar sales tax (VAT). The Customer hereby agrees to pay an amount in respect of any applicable VAT.  To view the Correspondent Bank details and charges, scan this QR code														تفاصيل هذا الاحتفاظ بالم جميع الرسو. أخرى (فات) المفعول						
		Customer Signature(s)  KHAIZRAN ALTHHABI KITCHN													-0-			—			ىل (ق)	توقيع العم					
										∣KI	HAIZI	KAN	ALT	ннА	BIK	TC+	INS .	ΑN	ID RI	=ST							

have read, understood, and accept to abide by the Terms and Conditions lated on the Emirates Islamic website,

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Customer / Signatory Name(s)

اسم العميل / الأسماء الموقعة