



የኢትዮጵያ ንግድ ባንክ  
COMMERCIAL BANK OF ETHIOPIA  
International banking division  
User Access Request Form

Request Date 14/12/2024

|   |                          |  |   |   |  |
|---|--------------------------|--|---|---|--|
| Department/Branch   | <u>DENBEL MISRA</u>      |  | MTO Agents ( Put X on Requested)                  | Account Type Requested ( Put X on Requested)    | If it is User access related request ( Put X on Requested)         |
| Employee name   | <u>KASIM JAILAN DEKO</u> |  |   |   |  |
| Employee ID   | <u>D42019</u>            |  | World Wide Cash Express <input type="checkbox"/>  | <input type="radio"/> Devise Registration       | <input type="radio"/> New User <input checked="" type="checkbox"/> |
| Email address   | <u>Kassim Jailan@che</u> |  | Tans fast Re <input type="checkbox"/>             | <input type="radio"/> Branch Registration       | <input type="radio"/> Reset Password                               |
| Employee mob.   | <u>0913750595</u>        |  | world remit <input type="checkbox"/>              | <input type="radio"/> Administrator User Access | <input type="radio"/> Disable User Access                          |
| Employee Signature  |                          |  | Money Gram <input type="checkbox"/>               | <input type="radio"/> Cash Payment User Access  | <input type="radio"/> Modify User Access                           |
|   |                          |  | Bole Atlantic <input checked="" type="checkbox"/> |   |  |
| Western union User Access Request for replacement and new user  |                          |  | Western Union <input checked="" type="checkbox"/> |   |  |
| Name of employees to be deleted (previous user)   |                          | Name of employees to be added (new user) |   | Name of employees to be Reset(existing)         |  |
| User  | Name                     | User                                     | Name  | User  | Name   |
|   |                          |  |   |   |  |
|   |                          |  |   |   |  |
|   |                          |  |   |   |  |
|   |                          |  |   |   |  |
|   |                          |  |   |   |  |
|   |                          |  |   |   |  |
|   |                          |  |   | If Other, please specify                        |  |
|   |                          |  |   |   |  |
|   |                          |  |   |   |  |
|   |                          |  |   |   |  |
|   |                          |  |   |   |  |
|   |                          |  |   |   |  |
| By using MTO's access with my access right, I agree to comply for the terms of use, security policy and privacy policy of both CBE & MTO agents |                          |  |   |   |  |

Approved by Name Mlegarchu Belachew

anch/Division Stamp

Signature

11085C

