



Stamp				
Cross Entry			S	Authorised signatorie
	Aq pa	Confirme		Entries passed by
	eq pà	Authorise		Captured by
				Back office
	paud	Time pho		Signature
		Date pho		Name of receiver
	pauoud o			Presenter Signature
	cial name		прег 63 - 274969 Р 63	Positive identification nur
Company official name				Name of customer/preser
Confirmed between			0 2 0 Time	Date 2 5 0 2 2
Call back confirmation				Walk in customers
For Bank use only				
The Indian			0542 790590	Contact Numbers
	089087 2420		2002 200600	Full Names
•				Authorised Signatories
			- ad	
I/We acknowledge that no Krigs instruction of the RTGS instruction.				
event of any proven claim is affected to that he deemed to have been accepted by the bank for any purpose until my/ our account with details I/We acknowledge that no RTGS instruction shall be deemed to have been accepted by the bank for any purpose until my/ our account with details				
First Capital Bank Limited to reverse, block or suspend any unlawful use of the RTGS system. First Capital Bank Limited's liability in the claims, liability or losses whatsoever arising from this transaction or unlawful use of the RTGS system. First Capital Bank Limited's liability in the event of any proven claim is limited to and may not exceed interest on the transaction amount.				
understand that it is an offence to use the ZEL15 to undertake of ractificate indicating a indemnity First Capital Bank Limited against any cost, First Capital Bank Limited any unlawful transactions. I/We indemnity First Capital Bank Limited in Limited any unlawful use of the RIGS system. First Capital Bank Limited is liability in the				
errors, omissions or delays in cransmission actinodeable to me, as or children property and property in transactions. I/We irrevocably authorise				
Further understand that payments made via the ZELT3 are mind and moves are more than the payments and howsoever arising or				
undertake to retain the supporting documents and involces for this chains the provide the reversed on set aside for any reason whatsoever.				
respect. I/We	Prormation is true and accurate in every	t the above in	the and declare to First Capital Bank Limited tha	eserges ydesed ob etwi
				Area Office Code
	er No.	Business Partn	1 TO	noidegildO xeT
				ZIMRA Payment Details
		nder	Imara Edwards Securities -Sponsoring Broker Ter	Transaction description
	Te ■	ent Othe		Reason for payment
			01121 064 850 020	Account number
	Kwame Nkrumah	Branch	CBZ	Beneficiary's Bankers
			Procurement Regulatory Authority of Zimbabwe	Name and address
Beneficiary's Details				
	7312	Branch	6069169	Debit Account Number
	7370	1 4	JMZ	Account Denomination
a low thom			Block 2 Tendeseka Office Park, Samora Macheal I	Business Address
		Parare Harare		Name of Business/Occups
		ISOMION (OF)	Imara Capital Zimbabwe (Pvt) Ltd	pplicant's full name
		ID. Number	p41(p1d) sinds design [21]	Applicant's Details
V			One Thousand Nine Hundred and Twenty Five Dollars Only	Amount in words
		2200 20104	1 926.00	(G2U) earugif ni JnuomA
	VAN V W M M b b	Value Date		Kindly effect the following
STINGUES SHOWEN S STANGE S STANGUES STA			Application for electronic transfer	
2TH	MAS ATAMOS			Dear Sir/Madam
StampuTRE	JawanAC Z		Branch	2157 - Corporate
NA PA	vessa .			First Capital Bank
0000	BECELL		Тһе Мападег	
1	NE SINE		0 2	Date 2 5 0 2 2 0
1000	Callian Callia	Serial Numb	ebaces, comprete in 1710rucue	Customer to rill in blank

Zimbabwe Electronic Transfer and Settlement System (ZETSS) Payment Form (ZWL\$)