

## APPLICATION ORDER FOR OUTGOING TRANSFER

Branch: JDEIDEH Ordering Customer: Customer's Address:	eرع : SNS APJ	ונ	Ref#: O	T/JD/		رقم : العميل : العنوان :	
By debiting the A/C#: Please pay to Benefici Bank: Swift Code: Intermediary Bank Na	ary's B.O. BABELBBE	0265210024602000 B. SAL chrieh Branch				رقم الحساب: ادفع لأمر مصرف: رقم السويفت:	
A/C Number:						لحساب رقم:	
Beneficiary's Name:		ORK SOLUTIONS SAL				اسم المستفيد :	
Beneficiary's Address: Beneficiary's A/C#:	Bauchrieh, Elec	tricity Street, Hachen	n Center, 1 <sup>લ</sup> Flooi	r		عنوان المستفيد : رقم حساب المستفيد :	
Sort Code		IBAN		AB	A / or FW		
		LB770075000000 64905400	0011401				
Amount:						المبلغ :	
Rate:			C/V: Chg.:	US	3638.55	-	
Value Date: 02	/05/2017		Comm.: Total:				
Correspondent:		_	OP Code:	:		_	
Details Of Charges: Purpose Of Paymer		☐ SHA station de Compte	☐ BEN			□ OUR	
ruipose Oi rayillei	it. Allifier	itation de Compte					
communicate to its such as: my/our ful whatsoever from a I/We the undersign	I name and address ny kind from the Ba ed confirm having ii	nk any requested in , my/our respective nk's side. revocably requeste	formation for the account number of the formation for the formatio	he purpo per, etc. execute	se of exect without any the above-	uting the above trans y responsibility	fer
Date: 0	e: 02/05/2017		Signature:				
Prepared by		Compliance Officer			Approved by		