APPLICATION ORDER FOR OUTGOING TRANSFER

Branch:	JDEIDEH	:	Ref#:	OT/JD/	:

Ordering Customer: SNS APJ   :

Customer's Address: :

By debiting the A/C#:   LB08004820500265210024602000   :

Please pay to Beneficiary's   **B.O.B. SAL**

Bank: **Bauchrieh Branch**   :

Swift Code: BABELBBE   :

Intermediary Bank Name & SWIFT Code:

A/C Number: :

Beneficiary's Name: SNS SUPPLY NETWORK SOLUTIONS SAL OFFSHORE   :

Beneficiary's Address: Bauchrieh, Electricity Street, Hachem Center, 1ˢᵗ Floor   :

Beneficiary's A/C#:   :

Sort Code	IBAN	ABA / or FW
	LB77007500000011401 64905400	

Amount: :

Rate: C/V: USXXX

                                                                        Chg.:

Value Date: 02/05/2017   Comm.:

                                                                        Total:

Correspondent: OP Code:

Details Of Charges: ☐ SHA   ☐ BEN   ☐ OUR

Purpose Of Payment: Alimentation de Compte

I/We the undersigned hereby grant, at my/our own liability, Saradar Bank SAL the express authorization to communicate to its Correspondent Bank any requested information for the purpose of executing the above transfer such as: my/our full name and address, my/our respective account number, etc. without any responsibility whatsoever from any kind from the Bank's side.

I/We the undersigned confirm having irrevocably requested from you to execute the above-described transfer, releasing any liability from your side, for any delay or non-reception of funds by the beneficiary, that may arise.

Date: **02/05/2017**   **Signature:**

Prepared by   **Compliance Officer**   **Approved by**