

APPLICATION ORDER FOR OUTGOING TRANSFER

Branch: JDEIDEH Ordering Customer: Customer's Address:	الفرع : SNS APJ	Ref#: OT/	رقم : العميل : العنوان :
By debiting the A/C#: Please pay to Beneficiary's Bank:	LB08004820500265210024 B.O.B. SAL Bauchrieh Bran		رقم الحساب :
	SABELBBE SWIFT Code:		:
A/C Number:			:
Beneficiary's Name: S	NS SUPPLY NETWORK SOLUT	ONS SAL OFFSHORE	:
Beneficiary's Address: Beneficiary's A/C#:	Bauchrieh, Electricity Stree	t, Hachem Center, 1 st Floor	:
belieficiary S A/C#.			•
Sort Code	IBAN		ABA / or FW
	LB7700750 64905400	00000011401	
Amount:			:
Rate:		C/V:	US3638.55
		Chg.:	
Value Date: 02/05/2	017	Comm.:	
		Total:	
Correspondent:		OP Code:	
Details Of Charges:	□ SHA	□ BEN	□ OUR
Purpose Of Payment:	Alimentation de Co	mpte	
communicate to its Corr such as: my/our full nam whatsoever from any kir I/We the undersigned co	espondent Bank any reque ne and address, my/our res nd from the Bank's side. nfirm having irrevocably re	sted information for the p pective account number, equested from you to exec	L the express authorization to burpose of executing the above transference. Without any responsibility cute the above-described transfer, is by the beneficiary, that may arise.
Date: 02/05	/2017	Signatu	re:
Prepared by	Compl	iance Officer	Approved by