

## APPLICATION ORDER FOR OUTGOING TRANSFER

Branch: JDEIDEH Ordering Customer: Customer's Address:	فرع : SNS APJ	l)	Ref#:	OT/JD/	رقم : العميل : العنوان :
By debiting the A/C#: Please pay to Beneficiary Bank:	/'s <b>B.O.</b>	0265210024602000 B. SAL chrieh Branch			: :
Swift Code: Intermediary Bank Name	BABELBBE & SWIFT Code:				:
A/C Number:					:
Beneficiary's Name:	SNS SUPPLY NETW	ORK SOLUTIONS SAL	OFFSHORE		:
Beneficiary's Address:	Bauchrieh, Elec	tricity Street, Hacher	n Center, 1 <sup>st</sup> Flo	or	:
Beneficiary's A/C#:				:	
Sort Code	IB	AN		ABA / or FW	
		77007500000001 905400	1401		
Amount:					:
Rate:			C/V:	US3638.55	
			Chg.:		
Value Date: 02/05/2	2017		Comm.: Total:		
Carragnandant			OP Code:		
Correspondent: Details Of Charges:	г	SHA	□ BEN		□ OUR
Purpose Of Payment:		ion de Compte	L DEN		L OOK
I/We the undersigned h communicate to its Cor such as: my/our full nar whatsoever from any ki I/We the undersigned c releasing any liability fr	respondent Bank a me and address, m ind from the Bank' onfirm having irrev	any requested inforn ny/our respective acc s side. vocably requested fr	nation for the p count number, rom you to exe	ourpose of exect etc. without and cute the above-	uting the above transfer y responsibility described transfer,
Date: 02/0	5/2017		Signatu	re:	
Prepared by		Compliance Offi	cer	Арр	proved by