Date: 26/06/2023

Order Form cum A2 Form

The N	Manager,
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EBIXCASH World Money Limited (erstwhile CentrumDirect Limite

Re: Application for foreign exchange This is to request you to issue me foreign exchange as requested below

Purpose of remittance:	OVERSEAS EDUCAT	ΠΟN - S0305			
Mode of remittance:	TT				
FCY Currency:	AUSTRALIAN DOLL			(24005.00	
Forex Value	11450.00		Amount (INR)		
Details of the remitter:				INDIAN	
			PAN:	AZIPK2666H	
Name :	RAVINDER KUMAR		ID:	PAN	
Address:	135 WARD NO 17 2 S	SURJEET SINGH COLONY GANGANAGAR	Number:	AZIPK2666H	
			Date of Issue:		
	SRI GANGANAGAR-	-335001 RAJASTHAN	Place of Issue:		
			Validity:		
Details of the Beneficiary		- Calutions			
Name : Account Number :	Western Union Business Solutions 17358-019				
Banker:	BANK OF AMERICA N.A. SYDNEY,AUSTRALIA				
Address:	LEVEL 64 MLC CENTRE 19 MARTIN PLACE SYDNEY NSW 2000 AUSTRALI				
Swift Code:	BOFAAUSX				
		ed under the LRS in the current financial year is U	ICD	. 1 .	
USD 250,000/- (USD Do Bank of India for the said and the foreign exchange above does not involve, a of the FEMA 1999 Act of for any incorrect informal mentioned purpose will I	ollar Two Hundred and Fi d purpose and certify that to e shall not be used for proband is not designed for the or of any about this transaction provided by me. I furt be used within 60 days of pays same will be surrende	ng the current transaction is within the overall limit fty Thousand Only), which is the limit prescribed the source of funds for making the said remittance nibited purposes. The transaction details of which purpose purpose of any contravention or evasion ction in terms of this declaration. I shall be responsible confirm that the foreign foreign exchange relepurchase. In case it is not possible to use the foreign ed to an authorised person. I am neither a political	by the Reserve e belong to me are mentioned n of the provision iible and liable ased for the aborg gn exchange	ons	
Signature of the Remitter Name If applicant is minor					
Signature of the natural g	uardian of the applicant @				
Name:		Relationship with the Applicant:			
Certificate by the Author	ised Dealer				
·		de by/ to ineligible entities and that the remittance	is in conformity	with	
		me to time under the Scheme. I have verified KY0			
Name and designation of				-	
Stamp and seal					
Signature	Date	Place			