



## LOCAL TRANSFER REQUEST FORM

### SENDER ACCOUNT DETAILS

Date of request		Ref.	
Sender name			
Account no.		Telephone No.	

### BENEFICIARY ACCOUNT DETAILS

Beneficiary Name	
Beneficiary Account N°	
Beneficiary Bank	

### FUNDS TRANSFER DETAILS

Currency	<input type="checkbox"/> FRW <input type="checkbox"/> GBP <input type="checkbox"/> EURO <input type="checkbox"/> USD	<input type="checkbox"/> Others (Specify)	
Amount in words			
Amount in figures	<input type="checkbox"/> Charges on my account <input type="checkbox"/> Charge beneficiary		
Purpose of transfer			

I / We hereby confirm that the transfer request instruction specified above are correct and have been reviewed by myself / ourselves as true.

Signature		Date	
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### BANK USE ONLY

Reviewed by:			
Signature		Date	