

Funds Transfer Form

PLEASE COMPLETE IN BLOCK LETTERS OR TICK (✓) APPROPRIATE BOX UNLESS OTHERWISE INDICATED

A: SENDER INFORMATION...

Name of Account/ Member Name:	Member No:		
Telephone No:	eMail Address:		
Postal Address:	Code:	County:	Country:
Amount in Figures:			
Amount in Word:			

B: BENEFICIARY (RECIPIENT) INFORMATION...

Account Name (As Per Bank):	
Bank Name:	Bank Branch:
Bank Account No:	Swift Code:
Special Instructions:	

C: APPLICANT AUTHORIZATION...

By signing below, I authorize QONA SACCO Limited to execute the above fund's transfer in accordance with the Terms and Conditions for fund Transfers.

Authorized Signature:	Date: DD MM YYYY
-----------------------	------------------

2 nd Authorized: Signature (Where Applicable)	Date: DD MM YYYY
--	------------------

D: REQUIREMENTS...

1. Copy of bank details (canceled cheque, ATM **front page only** card copy or bank statement)
2. For transfer to Third-party share a copy of either a contract, a sale agreement, a proforma invoice, or evidence of shareholding.
3. Any Cancellation on the form is not allowed.