<b>`</b>	CIMB	ISL	.AM	IC
	Islamia Dauly D	أم د ماه د (	1071000	LA

CIMB BANK

**REMITTANCE APPLICATION FORM** All information is required unless otherwise specified. 00338862

LAMPIRAN 1

COMPUTER VALIDATION (for debit account only)

Branch :

				PUTER VALIDATION (for debit account only)
APPLICATION FOR	Telegraphic Transfer (TT)	RENTAS Transfer	Interbank GIR	D (IBG)
	Banker's Cheque	Foreign Demand Draf		
SIS TRANSFERAMO	UNTOY	25 I	XCONTRACT Cifyouha	velaniagreed)FXirate withius
Remitting Currency	Amount	Contract Number		Dealer
· · · · · · · · · · · · · · · · · · ·			1	
3 BENEFICIARY/S	PARTICULARS			
Name			<u></u>	
1.C / Passport No. / Co	ompany Registration No. / Other I			Resident Non-Resident
Address				
	└──┤──┤──┤──┤──┤──┤──┤		<u></u> 11111111	
Postcode				[Tel. No.]
Bank's Name	BANKPARTICULARS			
Beneficiary's Account		<mark>.   _   .,  </mark>   .   .   .   .   .   .   .   .   .	<u></u>	
Address' (if available)			أحجبا همومها ومسيا المستلم المسالم المسالم	
		Postcode	Country	
SWIFT Code		ng Code (Optional)		IIPS UID/Fedwire no (USA), Bank Sort Code (UK), BSB no (AU), SC no, (IN), CNAPS no (CN)
				SC Ro, (IN), CNAPS RO (CN)
Name				
	ompany Registration No. / Other I			
Resident'	Non-Resident, please state co			
Local Address				
			Postcode	Mobile No.
6. DETAILS OF TRA	ANSFER For BG Only: Appears	in payee's statement	n an a star and a star star star star	
Beneficiary's Referen			Other Payment Details (C	Optional)
find the second s	BANK DETAILS EFORTIONIX	Optional).		
Bank's Name		E E E	Intermediary Bank	SWIFT Code
Address	<u>1</u>			
				COMPUTER VALIDATION
KOMPONISORIA	IENT			
Debit Account No		nga menungki kana di seber kari kana seberah kanangan kanangan kari kanangan kanangan kanangan kanangan kanang Kanangan kanangan kana	ana ana amin'ny fisiana amin'ny fisiana amin'ny fisiana amin'ny fisiana amin'ny fisiana amin'ny fisiana amin'ny	Fund Transfer Charges - For TT Only
RM Account No.	┉┉┉┟┯━┛━━┛━━╋╼┉╋┈┉╋╴┉╷╿┯╼╼╋╼┉┷	gn currency account	(SHA) for Shared	
House Cheque N		slamic Bank Berhad	(OUR) for Remitter	
	MB Account Holder Only)			(Only with officer's approval)
19 DECLARATION	AND SIGNATURE (1) Please cor	mplete/attached/declaration/fc	m. osterne operations	
PURPOSE OF PAYM	ENT (Please provide supporting do	cument(s). See reverse of this for	m for guide. BNM form P re	quired for transactions of RM200,001 and above
	vices & Investment Income		tment Transaction*	BNM FEA Rules Approval Ref. No. (if any):
Please specify for all				
<b>Relationship betwe</b>	en Applicant and Beneficiary	Related, please specify		Not Relate
			<b>—</b> –	
Foreign Worker Rer	mittances 🛛 🗌 Non-Residen	t who works in Malaysia less t	nan 1 year 🛛 🛄 Non-Res	sident who works in Malaysia for 1 year & mo

 I/We declare and confirm that all the information herein is true and correct and in compliance with the Foreign Exchange Administration Rules made pursuant to the Financial Services Act 2013/Islamic Financial Services Act 2013 and the Central Bank of Malaysia Act 2009. I/We shall be fully responsible for any inaccurate, untrue or incomplete information provided in this form.

Privacy Notice Acknowledgement:

 I/We hereby acknowledge that I/We have accessed and/or read the Privacy Notice issued by CIMB Group (which is available at all CIMB website at www.cimbbank.com.my or www.cimbislamic.com.my or has otherwise been made available to me/us) and confirm my/our agreement to the same.

Applicant's Signature		Date (DD	Date (DD/MM/YY)		
10 FOR BANK'S US	EONLY	A CONTRACTOR OF			
Rate		Received Time	Teller		
RM equivalent		Final Approval Time	Txn approved by Officer 1		
Commission		FEA Rules checked by	Txn approved by Officer 2		
Stamp Duty		Watchlist checked	Instrument signed by Officer 1		
Service Charge		Signature verified by	Instrument signed by Officer 2		
Total Amount in RM		COMET verified by	Remarks		
<u>,,,,,,,,,</u> ,,,,,,,,,,,,,,,,,,,,,,,,,,,			ACCOUNTING VOUCHER		