

To: Mega International Commercial Bank Co., Ltd.
Amsterdam Branch
Fax: 020 - 66 49 599

Request For Payment

Date:

Test code:

Please debit my/our account no. _____ for

USD _____

EUR _____

Plus your charges, if any, and make a payment as follows:

Beneficiary name	
Beneficiary A/C no.	
Beneficiary Address and Tel. No.	
Account with Bank	
SWIFT CODE	
Bank address/Tel. No.	
Details of Payment	

Remitter:

Authorized Signature(s)