

REMITTANCE APPLICATION FORM

汇款申请表

To: Alpen Baruch Bank
Attn: Payment Operations
致瑞通銀行
收件者: 支付业务部

Date 日期:	(DD 日/MM 月/YY 年)	
Account number 帐户号码: _		
Customer Name 客户姓名:		
dated 我/我方请求并授权予	orize the Bank to effect the following payment through Tel 该银行执行以下电汇交易,交易日为: (DD 日/MM 月/YY 年)	
Remittance Amount 汇款金额		,
USD 美元:		(In Figures 数字)
USD 美元:	NQ- N	(In Words 大写)
/ Amount in time deposit 定期	存款金额 (order number 定期单号码:) for:
(Please choose 请选择) □Principal 本金 □Interest 利息		
Beneficiary (F59) 收款人	A/C No. 账号: Name 姓名: Address 地址: Country 国家:	
Beneficiary's Bank (F57) 收款银行	Name 名称: SWIFT Code 银行国际代码: Address 地址: Country 国家:	

Intermediary Bank(F56) (if applicable)	Name 名称:			
中转银行(如适用)	SWIFT Code 银行国际代码:			
	Address 地址:			
	Country国家:			
Beneficiary/Remittance Information 收款人 / 汇款资料 (F70)				
Reason for Payment (if applicable) 付款原因 (如适用)				
Fund Transfer Charges (F71)	☐ All local and overseas charges borne by beneficiary (BEN)			
汇款费用	收款人支付所有费用 □ All local and overseas charges borne by remitter (OUR) 汇款人支付所有费用			
	□ Local charges borne by remitter & overseas charges by beneficiary (SHA) 汇款人支付本银行费用及收款人支付其他银行费用			
Special Instruction for Alpen Baruch Bank (F72) 特别指示给予瑞通银行				
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Declaration声明	30L 1 10F A			
I / We confirm that the above payment and instructions are subject to the provisions in the applicable account opening form and terms and conditions governing my/our accounts or deposits with the Bank which I / we have read and				
accepted. 我/我方确认以上支付和指示及其说明,均遵从管理我的/我方的帐户或存款的银行的相关帐户开立表格及条款,而我/我方亦已阅读和接受此等相关条款。				
Authorized Signatory (in accordance with signing mandate) 授权人 签署 (与签署授权一致)		FOR BANK USE ONLY		
		Fax Indemnity Place: YES/NO		
		AML Checked by:		
		Transaction Ref.:		
Name 姓名:		Exchange rate:		
		Commission:		
		Inputted by:		
Contact No. 联络电话号码:		Approved by:		
		Authorized by:		
		Remarks		