



APPLICATION TO TRANSFER FOREIGN EXCHANGE

To be completed in accordance with section 59 of the Bank of Botswana Act, 1996

Please ensure to complete all relevant sections. The field marked with asteric are mandatory field and failure to complete them will delay execution of your transfer.

Date.....

Account number

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Please tick the appropriate box

Application for

TELEGRAPHIC TRANSFER **FOREIGN CASH** **DRAFT**

CURRENCY	AMOUNT
<input type="text"/>	<input type="text"/>

DETAILS OF APPLICANT (INDIVIDUAL)

NAME
PASSPORT /ID No
ADDRESS

DETAILS OF APPLICANT (COMPANY)

COMPANY NAME
PHYSICAL ADDRESS

*** DETAILS OF BENEFICIARY**

NAME OF BENEFICIARY
PHYSICAL ADDRESS
ACCOUNT NUMBER

