

Full name of bank or financial institution

Full address of bank or financial institution

Name of account holder

Account Type - Mandatory : Should be 'C' for Checking (default) or 'S' for Savings

**Beneficiary Account Number - Mandatory** 

Beneficiary Full Name & Address - Mandatory.

Payment Details Field - Mandatory: Reason for Payment should be included

Beneficiary Bank Identification Code (Swift BIC) -

| full 1 | 11 ch | aract | er Bl | C req | luired | d - if 8 | 3 cha | racte | rs las | st 3 = | XXX - Mandatory |
|--------|-------|-------|-------|-------|--------|----------|-------|-------|--------|--------|-----------------|
|        |       |       |       |       |        |          |       |       |        |        |                 |

Currency the account is held in ( If left blank local currency will be used)

| I wish the payment to be paid by direct deposit to the account noted above. |       |     |  |  |  |  |  |  |
|---|-------|-----|--|--|--|--|--|--|
| CAE/IPI Number  | C     | ate |  |  |  |  |  |  |
| Name  | Signa | ure |  |  |  |  |  |  |