

International Draft Application

Branch number Br	anch name	
I am making this draft on behalf of:	Bank use only	
Myself - Complete Section	Date Recieved Date Processed	
Someone else - Complete Sections A & B	Draft serial number	
Section A Applicant's details (and payment is made Name Address Customer Number Phone no. Section B Details of person lodging this applica Name Address	1 Phone no. 2	
Customer Number Phone no.	1 Phone no. 2	
Draft details		
Draft currency Amount	Exchange rate (selling)	
Local currency Amount		
Charges currency Amount		
Total payment (currency) Amount		
	eque	
Payment from account	Fee/Charges from account	
Payee name and address		
Purpose of payment (mandatory)		
☐ Gift/ payment to family or friend ☐ Payment of services ☐ Expatriate payment to home country		
Payment of goods Market settlement		
Other (please specify)		
Details		

1000003145 09/07 Page of



International Draft Application (cont.)

Privacy Acknowledgement

Where ANZ Bank (Samoa) Limited ('**the Bank**')collects any personal information in connection with your application, it does so in order to carry out your instructions and to comply with applicable laws. The Bank may disclose that information to the beneficiary's bank, a correspondent or any relevant government authorities. You may request access to your personal information at your nearest branch.

Agreement and authorisation

By signing this Application for an International Draft you acknowledge and agree that you:

- (a) Have read and understood the Bank International Draft Terms and Conditions and agree to be bound by them;
- (b) Declare that all information you have provided to the Bank on this Application form is true and correct
- (c) Authorise the Bank to debit your account nominated in the 'Payment from account' or 'Fee/Charges from account' sections in this document, with the total payment, commission (if any), other fees, costs and duties which are imposed by the Bank in connection with this International Draft Application;

(d) Confirm that the amount to be transmitted is as star	ted below.
Currency Amount	
In the event of any inconsistency between the English a	nd other language content of this form, the English will apply.
Important: Where payment is requested from a joint a holders. Please write all names with family first	ccount, this application must be signed by all joint account
Application by Individual	
Applicant's Name	
Applicant's Signature	
	Date
Applicant's name	
Applicant's Signature	
	Date
Application on behalf of Company, Partnershi, Signed for and on behalf of (full name of Legal Entity):	p or other Legal Entity
by its authorised legal representative(s).	
Signature of Authorised Legal Representative	
	Date
Full name of Authorised Legal Representative	
Signature of Authorised Legal Representative	Date
Full name of Authorised Legal Representative	1

1000003145 09/07 Page of