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TRANSFER FORM

DATE | D | D | M | M | Y | Y | Y | Y |
AMOUNT _____ , _____ CURRENCY

FROM ACCOUNT # _____
ACCOUNT NAME _____
ADDRESS _____
COUNTRY _____
PHONE _____
E-MAIL _____



TO ACCOUNT # _____
 GIROBANK LOCAL BANK _____
BENEFICIARY'S NAME _____
ADDRESS _____
COUNTRY _____

REASON OF TRANSFER

CHARGES FOR BENEFICIARY

CLIENT SIGNATURE

FIAT

BALANCE
SIGNATURE