



BANK OF BARODA (TANZANIA) LIMITED

MONEY TRANSFER

TISS Application Form

DATE _____ 20____

Please effect the following Money transfers on our /my behalf Transfer Details are as follows *(please use block letters)*

Amount:

Amount in words: (Tzs Only) _____

PAYMENT DETAILS: _____

BENEFICIARY:

NAME & ADDRESS OF BENEFICIARY	
ACCOUNT NO.OF BENEFICIARY	
BANK	
BRANCH	

Note: The Bank will not accept responsibility for errors or delays in transaction or any other consequences arising from causes beyond its control

APPLICANT (Ordering Customer)

NAME	
ADDRESS TEL NO:	
DEBIT MY / OUR ACCOUNT NO.	
AUTHORIZED SIGNATORIES	1. _____ 2. _____

FOR BANK USE ONLY			
Tiss No:	<input type="text"/>	Cheque No:	<input type="text"/>
Commission	<input type="text"/>	Time received:	<input type="text"/>
ENTERED BY _____		AUTHORIZED BY _____	