



FUND TRANSFER APPLICATION FORM

T.I.N. 000-188-209

(Branch)

No. _____

1st copy - Branch
2nd copy - Client

DATE : _____

APPLICATION FOR:

- Peso Demand Draft
- FX Demand Draft
- Manager's/Cashier's Check
- Gift Check
- Mabuhay Traveler's Check
- Peso Telegraphic Transfer
- FX Notes
- FX Telegraphic Transfer
- FX Traveler's Check
- Others, *pls specify* _____

MODE OF PAYMENT:

- Cash
- Debit Account No. _____

CONDITIONS:

- FUND TRANSFER

It is distinctly understood that the issuing Bank shall assume no responsibility whatsoever for delay in the execution of this payment resulting from errors and/or delay in the transmission of the Bank's relative instruction to its paying branch/office or correspondent or for any other cause beyond its control.

- PESO / FX DRAFT / MC / CC / GC / TC / FX NOTES

It is hereby agreed that in case of loss or destruction of the original of any instrument issued by the Bank pursuant to this application, this Bank reserves the right to require from the Applicant/Purchaser and/or the Payee, an Affidavit of Loss and Surety Bond or any other sufficient security acceptable to this Bank as a condition precedent for the issuance of a replacement for the lost instrument/s or refund of the value thereof.

I further bind myself to be responsible for any fraudulent or erroneous instructions regarding any transfer of funds involving my deposit account with the Bank and agree to hold the Bank free and harmless from any liability arising therefrom.

Furthermore, for purposes of remitting funds to my PNB deposit account in the Philippines, I hereby waive my rights under the provisions of R.A.1405, otherwise known as the Law on Secrecy of Bank Deposits, and hereby authorize the Bank, its branches, agencies or any of its subsidiaries or correspondent banks to gain access and inquire into my PNB deposit account/s and to disclose such data and papers as are required by said regulatory agencies conformably with the "Know Your Customer Policy" principles, without incurring any criminal, civil or administrative liability therefor.

CONFORME: (Signature of Applicants/Depositors)

SIGN HERE

NAME OF APPLICANT:	TEL. NO.:
ADDRESS:	BIRTHDATE:
NATURE OF BUSINESS	PURPOSE: PERSONAL USE

Member: PDIC

THIS SERVES AS YOUR RECEIPT WHEN MACHINE VALIDATED / INITIALED BY TELLER

FORM 2029 (Rev. 06-2010)

NAME OF BENEFICIARY(IES) / PAYEE(S):	
ADDRESS / TEL. NO.:	
BENEFICIARY'S BANK / BRANCH: PNB LOS ANGELES	
BANK ADDRESS (if available): LOS ANGELES, CA	
SPECIAL INSTRUCTION/S (if any):	
AMOUNT (in words) THE RECIPIENT/S SHOULD RECEIVE:	AMOUNT (in figures)

FOR BANK'S USE ONLY			
SELLING RATE:	Amount / Face Value	\$	₱
BOOKING RATE:	Bank Commission		
TEST CODE:	Doc. Stamps		
DRAFT/CHECK NO(s):	Others		
DELIVERY PERIOD TO RECIPIENT/BENEFICIARY	Total Charges		
	TOTAL	\$	₱
ID(s) PRESENTED:	PROCESSED BY:	TELLER'S INITIAL :	
SIGNATURE/AVAILABLE BALANCE VERIFIED BY:	APPROVED BY:		

Signature Authenticated by:

Printed Name / Signature : _____
 PNB RCI Office : _____

Instructions for Official Check:

- PICK – UP** AT PNB LA Branch
- MAIL CHECK** to above address

Important: You need to indicate your current address where we can mail your check payment once your request is approved by the branch in the Phils. Failure to notify us of any changes in your address will result in additional fees for stop payment and re-issuance of checks

ID presented (include ID#, DOB, Expiry Date: _____
SSA number (if request is \$2,000.00 & above): _____