

Branch: _____

Date: _____

ACCOUNT DETAILS		
Account Holder's Name:		
Account Number:		
TRANSFER DETAILS		
Select one: RTGS Transfer <input type="checkbox"/> ACH Transfer <input type="checkbox"/>		
Beneficiary Name:		
Beneficiary Address:		
Beneficiary Address:		
Amount: \$		
Amount in words:		
Purpose of Transfer:		
Beneficiary Bank:	Branch:	
Beneficiary Account Number:	Account Type: Savings <input type="checkbox"/> Chequing <input type="checkbox"/>	
Branch Transit No.:	Swift/BIC:	
DECLARATION		
<p>I hereby request that Sagicor Bank Jamaica Limited ("the Bank") executes the transaction described in this request and in consideration of the Bank doing so, I agree to be bound by the Bank's policies and Terms and Conditions for Accounts as applicable to the said transaction.</p> <p>Please debit my/our Account with total costs for sending this transfer. I/We confirm that the above information was verified by me/us and found to be in order.</p>		
_____ Authorized Signature	_____ Date (dd/mm/yyyy)	
_____ Authorized Signature	_____ Date (dd/mm/yyyy)	
For Official Use Only	Fees Received: Yes <input type="checkbox"/> No <input type="checkbox"/>	Reason For Waiver:
	Entered by:	Signature:
	Time Posted:	Date (dd/mm/yyyy):
	Authorized by:	Signature:
	Time Authorized:	Date (dd/mm/yyyy):