



EASY REMIT FORM

Please make the following funds transfer
I/We have deposited cash/net bank transfer
AUD\$:
Exchange Rate
Amount in Foreign Currency
Destination Currency
Administration Charges

Deposit Slip		
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Remitter Information		
First Name		
Last Name		
Driving Lice / Passport No.	Date of Birth	
Easylink Customer ID if (Available)		
Residential Address		
Suburb/ Town	State	Postcode
Mobile	Home/ Work Phone	
()	()	
Email Address		
Purpose of Remittance	Occupation	
Source of Income		

Beneficiary Details		
First Name	Last Name	
Beneficiary Residential Address		
Suburb/ Town	State	Postcode
Mobile	Home/ Work Phone	
()	()	
Email Address		
Bank Name		
A/C/IBAN	CNIC No:	
Branch Name and Address		
Branch Code	Country	
SWIFT Code		
IFSC Code (If Applicable)		

I read all the terms and condition and I hereby declare that the information given on this form is true and correct. Easylink Finance Pty Ltd and Its Employees do not accept any liability for loss or damage which any person may suffer arising from mutilation, delay or wrong transmission of message and the remittance is being made at the sole risk and responsibility of the Remitter.

Signature: _____ Date: _____