HAKRINBANK N.V.

SWIFT INTERNATIONAL TRANSFER FORM

	DATE	
32A	**CURRENCY, AMOUNT**	
50	**ORDERING CUSTOMER**	
	Address	
	City / State / Country	
	KKF- / ID-number	
	Telephonenumber / E-mail address	
57	**BENEFICIARY BANK**	
	Address	
	City / State / Country	
	☐ SWIFTCODE	
	☐ ABA Routing / Sorting Code	
59	**BENEFICIARY**	
	Address	
	City / State	
	Country	
	ACCOUNTNUMBER / IBANnumber	
70	**REMITTANCE INFORMATION** (Description + Invoicenumber)	
	Licence- / IT-number	
56	**INTERMEDIARY BANK**	
	Address	
	City / State	
	☐ SWIFTCODE	
	☐ ABA Routing / Sorting Code	
71A	**BANKCHARGES** ☐ **SHA** (local charges for ordering customer and charges abroad for beneficiary)	
	☐ **OUR** (local charges and charges abroad for ordering customer)	
	☐ **BEN** (local charges and charges abroad for beneficiary)	
	ACCOUNTNUMBER TO DEBIT	**USD**
		EUR
		SRD

Do not write in this part	
	Signature + Company Stamp