



## INTERNAL FUND TRANSFER FORM (For KSBBL's Account Holder)

Date: ...../...../.....

**PLEASE ARRANGE TO DEBIT MY ACCOUNT AS PER THE INSTRUCTIONS GIVEN BELOW:**

Currency:

Total Amount in Figures:

Total Amount in Words:

### Details of Account Holder's (Applicant)

Account Holder Name: .....

Account Number: .....

Branch: ..... Branch Address: .....

Contact Number: .....

Purpose of Transfer: .....

### Details of Recipient (Beneficiary)

Beneficiary's Name: .....

Beneficiary's Account No.: .....

Branch: ..... Branch Address: .....

Contact Number: .....

.....  
Applicant's Signature

.....  
Authorized stamp (if any)

### For Bank's Use Only

Verified By:	Approved By:
Employee ID:	Employee ID:

### Customer Copy

Amount:	
Customer Account Number:	
Beneficiary Account Number:	Signature/Bank Stamp
	Verified By: