

Baptist Financial Services Australia Ltd

ABN 56 002 861 789 – AFSL 311062
 (“BFS” and “Baptist Financial Services”)
 A delegated body of Australian Baptist Ministries



Ph 1300 650 542

Email clients@bfs.org.au

Web www.bfs.org.au

International Telegraphic Transfer Application

Beneficiary Details (Mandatory - must provide full address (PO Box is insufficient) including country)

Please complete the Application before sending it to us via post or clients@bfs.org.au.

Please arrange for an International Telegraphic Transfer as detailed below and debit the Australia dollar value plus any fees relating to the transfer to the undermentioned Baptist Financial Services Australia Ltd (BFS) account.

Account number or IBAN number (if known):	Caution: As we are unable to check details, this Account may be credited whether or not held in the name specified		
Full Name:			
Full Address:			
Beneficiary Country:		Bank Name and SWIFT Code:	
Branch full address and country of beneficiary's bank:			
Correspondent/Intermediary Bank (if required):		SWIFT Code:	
Branch full address and country:			

Purpose of Remittance

Mandatory – e.g. gift, personal gift, sustenance, emigrant transfer or purchase, other.

Please provide specific details of your knowledge of Beneficiary and how funds will be used.

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Telegraphic Transfer Details

Type of Currency Required for Telegraphic Transfer:	(e.g., Aust Dollars; US Dollars etc.)
Telegraphic Transfer Amount:	Aust. Dollar \$ _____ OR Foreign Currency Amount _____
Currency Amount in words (default):	
Email Address for return of payment confirmation advice:	

Applicant Details and Authorisation

BFS Account Name:	
BFS Account Number:	

I/We acknowledge having read, understood and accept the terms and conditions applying to an International Funds Transfer as set out in our contained in our 'Financial Services Guide and Product Disclosure Statement – BFS Non Cash Payment Products'.

Authorised signatory (as per authority held by BFS)

Authorised signatory (as per authority held by BFS)

✕	✕
Name: _____	Name: _____
Phone: _____ Date: _____ (dd/mm/yyyy)	Phone: _____ Date: _____ (dd/mm/yyyy)

Office use only:

Entered by: (initials) _____ Date: _____ Client A/c Narration: ITT _____

AUSTRAC Notified Electronically by: _____ Date: _____