



GLOBAL BANK OF COMMERCE, LTD.

CASH WITHDRAWAL REQUEST

Submit via fax (268)462-1831 or GlobexSecure Internet Banking Service

*Customers must complete all fields marked with **

		Date:	
ACCOUNTS DETAILS			
*Customer Account Name		*Account Number	
DETAILS OF WITHDRAWAL			
*Recipient of Funds			
*Amount of Withdrawal		*Currency <i>(Please tick the appropriate currency)</i>	
		<input type="checkbox"/> USD <input type="checkbox"/> CAD <input type="checkbox"/> GBP <input type="checkbox"/> EUR	
AUTHORIZATION TO DEBIT ACCOUNT			
Signatory Name <i>(Please print)</i>		Customer Signature	Date
Signatory Name <i>(Please print)</i>		Customer Signature	Date
RECIPIENT DETAILS <i>(if different from Account Holder)</i>			
Recipient ID Type		Recipient ID Number	
Cash Received by <i>(Recipient Signature):</i>			Date
FOR BANK USE ONLY			
<i>Foreign Currency Rate:</i>		<i>Equivalent:</i>	
Account Name		Account Number	Amount
			DR CR
Customer Account Name:			
Cash Paid			
Commissions Cash		500700	
Commission Sundry Items		500800	
Total			
Prepared by		Date	Stamp
Authorized Signature		Date	
Authorized Signature:		Date	