



Bank of The Bahamas

L I M I T E D

FOREIGN CASH REQUEST FORM

(Please Print)

Branch: _____

| | | | | | | | | | | | | | | | |
|--|---|---|---|---|--|---|--|--|--|--|--|--|--|--|--|
| Requested Amount / Currency: | | | <input type="checkbox"/> USD | | | | | | | | | | | | |
| Account to Debit: | <input type="checkbox"/> Chequing | <input type="checkbox"/> Savings | | | | | | | | | | | | | |
| Traveler Name: | | | | | | | | | | | | | | | |
| Traveler ID: | <input type="checkbox"/> Passport [PP] | <input type="checkbox"/> Work Permit [WP] | <input type="checkbox"/> Central Bank Approval [CB] | # | | | | | | | | | | | |
| | Other Permits (e.g. Spousal Permit, Employment Letters, etc.) | | | | | | | | | | | | | | |
| Traveler Local Address: | | | | | | | | | | | | | | | |
| Telephone Contact: (Include Area Code) | | | | | | | | | | | | | | | |
| Carrier & Travel Ticket Number: | | | | | | | | | | | | | | | |
| Travel Destination: | | | | | | | | | | | | | | | |
| PERSON MAKING PURCHASE ON BEHALF OF TRAVELER DETAILS (if Traveler <u>not</u> present): | | | | | | | | | | | | | | | |
| Name: | | | | | | | | | | | | | | | |
| Local Address: | | | | | | | | | | | | | | | |
| Telephone Contact: (Include Area Code) | | | | | | | | | | | | | | | |
| EXCHANGE CONTROL REPORTING | | | | | | | | | | | | | | | |
| APPLICANT'S SECTOR (Select One): | <input type="checkbox"/> 9588 Individual - Resident | | | | | <input type="checkbox"/> 9590 Individual - Temporary Resident | | | | | | | | | |
| DELEGATED AUTHORITY CATEGORY (Select One Only) | | | | | | | | | | | | | | | |
| 2015 - Medical Personal Travel (up to \$15,000 per trip); Medical Sundry Exp. (up to amount on bill) | | | <input type="checkbox"/> 2012 - Education: Personal Travel Student: Sundry Exp. and Allowances up to \$15,000 per trip; Institution: Bills (up to amount on bill) | | | | | | 2018 - Travel (up to \$15,000 per trip for Personal-Holiday/ Other & Business/ Professional) | | | | | | |

I / We hereby certify the above information to be true and complete. If, in the event that this application is accepted by Bank of The Bahamas Limited, I/We authorize and consent to the bank obtaining further information about me/us and checking the information I/We have given here and exchanging information about me (us) with other parties. I/We agree to be bound by Bank of The Bahamas Limited Account Terms and Conditions Agreement.

Signature(s) of Applicant(s): _____

Date: _____

| | | | | | | | | | | | | | | | |
|------------------------------|-------------------------------|-------------------------------|-------------------------------|--|--|--|------------------|--|--|------------------------------|--|--|--|--|--|
| - FOR BANK USE ONLY - | | | | | | | | | | | | | | | |
| REMITTANCE SOURCE | <input type="checkbox"/> CASH | <input type="checkbox"/> CASA | CURRENCY TRANSACTION PAID IN: | | | | | | | <input type="checkbox"/> BSD | | | | | |
| AMOUNT REQUESTED | | | | | | | CONVERSION RATE: | | | SOLD BY (Stamp & Sign) | | | | | |
| FOREIGN EXCHANGE | | | | | | | | | | | | | | | |
| AMOUNT - INCLUDING EXCHANGE | | | | | | | | | | | | | | | |
| TOTAL AMOUNT FROM CUSTOMER | | | | | | | | | | | | | | | |