



## Payment/Receive Form

### CUSTOMER

#### BENEFICIARY

First Name:.....

Last Name:.....

Nationality:.....

Identification Type:.....

Identification #:.....

Address:.....

Amount:.....

Phone #:.....

Wari Code:.....

#### SENDER

First Name:.....

Last Name:.....

City & Country:.....

Phone #:.....

.....  
Customer's Signature

### FOR OFFICE USE ONLY

### TELLER

Branch:.....

Date:.....

Paid Amount:.....

Reference #:.....

.....  
Teller's Signature