

AUTHORIZATION LETTER																
Date:																
То	Account No / Card No :															
Branch Manager					-											
Trust Bank Ltd.																
Branch:	Account / Card Name :															
Dear Sir / Madam	71000	<u> </u>	oui c	4 1 4 4												
I/We hereby authorize Mr / Mrs bearing ID:																
ATM/Debit Card			Account Statement								Pay order					
FDR Advice			DPS Certificate							Cheque Book						
Balance Certificate					ncy (			<u>}</u>			Sanc	hayp	atra			
Outward Returned Clea	aring		0	)ther	(spe	cify)	:									
Cheque details :																
Signature of Mris attested below:  Signature of the Authorized Person  Attested																
Signature of the 1 <sup>st</sup> Application Mob No:	 nt									•	gnatui ob No		 Joint	Appl	 icant	
FOR BANK USE ONLY						stom		<b>)</b> :								
CHECK POINTS																
Signature Verified						Cha	rge R	Realiz	zed							
 Initiated Name, seal &											y ( BO		 M)			

<sup>\*</sup>Photocopy of valid ID Card should be attached.