

Application Form for Cashier's Order

Name of Applicant:

Contact number of Applicant:

Name of Beneficiary:

Purpose of Cheque

Amount in Philippine Peso

Amount excluding charges

Amount including charges

Amount in words

In payment, please debit my/our Currency Account No.:

Authorize a representative to receive the Cashier's Order

I/We authorize to receive the requested Cashier's Order
(name of authorized representative)

By signing below, I confirm that I have read and understood all the information provided in this form and declare that it is complete, true and correct. I further confirm that any electronic signatures appearing hereunder are the same as handwritten signatures for the purposes of validity, enforceability, and admissibility. I hereby agree to indemnify and hold harmless HSBC (including its successors and assigns) against all actions, claims, and damages of whatever nature which may result in connection with HSBC's reliance on the information contained herein and my signature, handwritten or electronic, below.

Signature of Applicant 1	Signature of Applicant 2	Signature of Applicant 3	Signature of Applicant 4
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
			

Cashier's Order RECEIVED

By: _____ Date: _____

For Bank Use Only		CO/DD Cheque No. _____
Please tick if verified		
<input type="checkbox"/> E97	<input type="checkbox"/> World Check (For Demand Draft Application only)	<input type="checkbox"/> SPECIAL INSTRUCTIONS/C42
<input type="checkbox"/> E921	<input type="checkbox"/> OPS 54/BOG 3	<input type="text"/>
_____	_____	_____
Checked by:		Officer's Signature