

Application Form for Cashier's Order

Name of Applicant:	<input type="text"/>
Contact number of Applicant:	<input type="text"/>
Name of Beneficiary:	<input type="text"/>
Purpose of Cheque	<input type="text"/>

Amount in Philippine Peso

Amount excluding charges	<input type="text"/>
Amount including charges	<input type="text"/>
Amount in words	<input type="text"/>

In payment, please debit my/our	Currency <input type="text"/>	Account No.: <input type="text"/>
---------------------------------	-------------------------------	-----------------------------------

Authorize a representative to receive the Cashier's Order

I/We authorize <input type="text"/>	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

Please tick if verified

<input type="checkbox"/> E97	<input type="checkbox"/> World Check (For Demand Draft Application only)
<input type="checkbox"/> E921	<input type="checkbox"/> OPS 54/BOG 3

CO/DD Cheque No. _____

☐ SPECIAL INSTRUCTIONS/C42

Checked by: _____

Officer's Signature _____