

To Our Valued Suppliers,

## INTERBANK GIRO AUTHORISATION FORM

We will be processing suppliers' payment through electronic payment such as GIRO and Fund Transfer directly into your designated bank account. Kindly fill up below and email the signed form to <a href="mailto:accounts@MFCL2000.com">accounts@MFCL2000.com</a> with your bank information details so that a copy of our remittance advice can be email upon successful deduction from our bank.

A Compa	ny Name	:	
	ered Address as bank records)	:	
Contac	t Person / Designation	. :(	
Telepho	one No.	-	
Fax No		:	
Email A	Address	-:	
Γ 2: VEND	OOR BANK INFORMATION	ON	
	ny Name	:	and the second s
Bank N	ame	-	and the same of
Bank B	ranch Name	:	1
Bank C	ode	10	all the second
Bank B	ranch Code / Swift Code	:	
Bank A	ccount No.	:	3
	sed Signature bank records)	:	
Name o	of Authorisation Signature	1	T 2000
Design Signatu	ation of Authorization	6	LLVVV
	y that the signature(s) affixe		KER AND TO BE COMPLETED BY THEM T 2 above is/are consistent with our records. And
Name of Ap	proving Officer		Authorised Signature and Stamp of Financial Institution

**REMARKS:** Please get your banker to certify this Interbank Giro Authorization Form before email the signed form to us. However, if you do not wish to be certified by your bank, we shall consider that this Interbank Giro Authorization Form is true and shall remit to the above bank based on the above information provided by you. However, we shall not entertain in the event of any dispute after that.