



APPLICATION FOR AMENDMENT/ CANCELLATION OF REMITTANCE

Date	25 Jan 2018
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Date of Remittance	22 Jan 2018	Beneficiary	BDE Co.,Ltd
CCY/Amount	USD 52,050.00	Paying Bank	MUFG Bank, Ltd, Shinjuku Branch
Bank Ref. No.			

Please tick appropriate box

Amendment: I/We hereby request you to amend the above mentioned remittance to the paying bank by cable as specified below.

Amendment Item	Original Terms	Amended Terms
<input checked="" type="checkbox"/> Beneficiary Name		
<input type="checkbox"/> Beneficiary Account Number	BDE Co., Ltd	BDE Asia Co., Ltd
<input type="checkbox"/> Others ()		

Cancellation: I/We hereby request you to cancel the above mentioned remittance.

Reason of Cancellation	
How to Receive Proceeds	<input type="checkbox"/> Credit to my/our account No. () with you <input type="checkbox"/> Others ()
* For Demand Draft Only	<input type="checkbox"/> Original Demand Draft attached <input type="checkbox"/> Report on Lost of the original Demand Draft : If the demand draft is found in future, I/We shall forthwith draw it from

For any applicable Bank Charges

How to Pay Charges	<input checked="" type="checkbox"/> Debit my/our account No. (100XXXX) with you
	<input type="checkbox"/> Deduct from the proceeds (* Cancellation only)
	<input type="checkbox"/> Others ()

I/We hereby agree that this request shall be handled in accordance with the conditions governing application for remittance set forth on the back on the application for remittance form, and that I/We shall not raise whatsoever objection to the actions you take in this connection.

I/We further undertake the responsibility to settle any dispute caused in connection with this request, and to protect your bank from any expense, loss or damages arising therefrom.

Taro Yamada

Taro Yamada
Managing Director
ABC Co., Ltd

Applicant / Company Name and Authorised Signature(s)

Bank Use Only

Handling Charge		collected <input type="checkbox"/>
Cable Charge		
Others		
Total Bank Charges		

CIF Code :	/ GL Code :
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Verify(DGM)*1 for	Verify (DH)*2	Check (Non-Manager)	Signature verify (Non-Manager)
	Cross-check(DH) for LstDD		



APPLICATION FOR AMENDMENT/ CANCELLATION OF REMITTANCE

Date 25 Jan 2018

Table with remittance details: Date of Remittance (22 Jan 2018), Beneficiary (BDE Co.,Ltd), CCY/Amount (USD 52,050.00), Paying Bank (MUFG Bank, Ltd, Shinjuku Branch), Bank Ref. No.

Please tick appropriate box

Amendment: I/We hereby request you to amend the above mentioned remittance to the paying bank by cable as specified below.

Table with 3 columns: Amendment Item, Original Terms, Amended Terms. Includes checkboxes for Beneficiary Name, Beneficiary Account Number (checked), and Others.

Cancellation: I/We hereby request you to cancel the above mentioned remittance.

Reason of Cancellation, How to Receive Proceeds, * For Demand Draft Only. Includes checkboxes for credit to account, others, original demand draft, and report on lost draft.

For any applicable Bank Charges

How to Pay Charges. Includes checkboxes for debit my/our account No. (checked), deduct from proceeds, and others.

I/We hereby agree that this request shall be handled in accordance with the conditions governing application for remittance set forth on the back on the application for remittance form, and that I/We shall not raise whatsoever objection to the actions you take in this connection.

I/We further undertake the responsibility to settle any dispute caused in connection with this request, and to protect your bank from any expense, loss or damages arising therefrom.

Taro Yamada

Taro Yamada
Managing Director
ABC Co., Ltd

Applicant / Company Name and Authorised Signature(s)

Bank Use Only

Table for bank charges: Handling Charge, Cable Charge, Others, Total Bank Charges. Includes a 'collected' checkbox.

CIF Code : / GL Code :

Table for verification: Verify(DGM)*1 for, Verify (DH)*2, Cross-check(DH) for LstDD, Check (Non-Manager), Signature verify (Non-Manager).



APPLICATION FOR AMENDMENT/ CANCELLATION OF REMITTANCE

Date 25 Jan 2018

Table with remittance details: Date of Remittance (22 Jan 2018), Beneficiary (BDE Co.,Ltd), CCY/Amount (USD 52,050.00), Paying Bank (MUFG Bank, Ltd, Shinjuku Branch), Bank Ref. No.

Please tick appropriate box

Amendment: I/We hereby request you to amend the above mentioned remittance to the paying bank by cable as specified below.

Table comparing Amendment Item, Original Terms, and Amended Terms. Includes checkboxes for Beneficiary Name, Beneficiary Account Number, and Others (Beneficiary Address).

Cancellation: I/We hereby request you to cancel the above mentioned remittance.

Reason of Cancellation, How to Receive Proceeds, and * For Demand Draft Only sections.

For any applicable Bank Charges

How to Pay Charges section with checkboxes for Debit my/our account No., Deduct from the proceeds, and Others.

I/We hereby agree that this request shall be handled in accordance with the conditions governing application for remittance set forth on the back on the application for remittance form, and that I/We shall not raise whatsoever objection to the actions you take in this connection.

I/We further undertake the responsibility to settle any dispute caused in connection with this request, and to protect your bank from any expense, loss or damages arising therefrom.

Taro Yamada (Signature)

Taro Yamada
Managing Director
ABC Co., Ltd

Applicant / Company Name and Authorised Signature(s)

Bank Use Only

Table for Handling Charge, Cable Charge, Others, and Total Bank Charges.

CIF Code and GL Code fields.

Table for Verify (DH)*2, Check (Non-Manager), and Signature verify (Non-Manager).



APPLICATION FOR AMENDMENT/ CANCELLATION OF REMITTANCE

Date 25 Jan 2018

Table with remittance details: Date of Remittance (22 Jan 2018), Beneficiary (BDE Co.,Ltd), CCY/Amount (USD 52,050.00), Paying Bank (MUFG Bank, Ltd, Shinjuku Branch), Bank Ref. No.

Please tick appropriate box

Amendment: I/We hereby request you to amend the above mentioned remittance to the paying bank by cable as specified below.

Table for Amendment: Columns for Amendment Item, Original Terms, Amended Terms. Includes checkboxes for Beneficiary Name, Beneficiary Account Number, and Others.

Cancellation: I/We hereby request you to cancel the above mentioned remittance.

Table for Cancellation: Reason of Cancellation (Beneficiary request to remit the different amount), How to Receive Proceeds (Credit to my/our account No. 100XXXX), * For Demand Draft Only (Original Demand Draft attached, Report on Lost of the original Demand Draft).

For any applicable Bank Charges

Table for Bank Charges: How to Pay Charges (Debit my/our account No. 100XXXX, Deduct from the proceeds (* Cancellation only), Others).

I/We hereby agree that this request shall be handled in accordance with the conditions governing application for remittance set forth on the back on the application for remittance form, and that I/We shall not raise whatsoever objection to the actions you take in this connection.

I/We further undertake the responsibility to settle any dispute caused in connection with this request, and to protect your bank from any expense, loss or damages arising therefrom.

Taro Yamada

Taro Yamada
Managing Director
ABC Co., Ltd

Applicant / Company Name and Authorised Signature(s)

Bank Use Only

Table for Bank Use Only: Handling Charge, Cable Charge, Others, Total Bank Charges. Includes a 'collected' checkbox.

CIF Code : / GL Code :

Table for verification: Verify(DH)*2, Check (Non-Manager), Signature verify (Non-Manager). Includes sub-headers for Verify(DGM)*1 for and Cross-check(DH) for LstDD.