

Annexure I

 Tamilnad Mercantile Bank Ltd Be a step ahead of life					
.....Branch					
TMB Money Transfer Application					
Date:					
1	Name and Address of Remitter				
<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Mobile No.					
2	Remitter's Account Number				
3	Amount of transfer				
₹. (Rupees)					
4	Purpose of remittance (tick appropriate column)				
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%; text-align: center;">Personal Use</td> <td style="width: 25%; text-align: center;">Family Maintenance</td> <td style="width: 25%; text-align: center;">Medical Expenses</td> <td style="width: 25%; text-align: center;">Others</td> </tr> </table>		Personal Use	Family Maintenance	Medical Expenses	Others
Personal Use	Family Maintenance	Medical Expenses	Others		
5	Name and address of beneficiary				
<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Pin Code <input type="text"/> Mobile No. <input type="text"/> DOB <input type="text"/> Male <input type="checkbox"/> Female <input type="checkbox"/>					
6	Name of Father/Husband of beneficiary				
I hereby agree that this amount sent shall be encashed by the above beneficiary within 30 days from the date of transfer. Otherwise, the said transferred amount will be credited in my above account on 31 st day from the date of remittance.					
Signature of Remitter					

For Branch use:

TMB Money Transfer Reference Number: (Generated in the system)	
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Signature of Officer**To be given to the remitter:**

TMB Money Transfer Reference Number	
Date of Remittance	

Signature of Officer

Annexure II
(To be used in duplicate)



.....Branch							
TMB Money Transfer - Receive Money							
Date:							
1	TMB Money Transfer Reference No.						
2	Amount Expected ₹. (Rupees)						
3	Place of Remittance						
4	Name and Address of Beneficiary						
	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 50%;"></td> <td style="width: 50%;"></td> </tr> <tr> <td>Male</td> <td>Female</td> </tr> <tr> <td colspan="2">Mobile No.</td> </tr> </table>			Male	Female	Mobile No.	
Male	Female						
Mobile No.							
5	Date of Birth of Beneficiary						
6	Name of Father / Husband of Beneficiary						
7	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 20%;">Purpose of remittance (tick appropriate column)</td> <td style="width: 15%; text-align: center;">Personal Use</td> <td style="width: 15%; text-align: center;">Family Maintenance</td> <td style="width: 15%; text-align: center;">Medical Expenses</td> <td style="width: 15%; text-align: center;">Others</td> </tr> </table>	Purpose of remittance (tick appropriate column)	Personal Use	Family Maintenance	Medical Expenses	Others	
Purpose of remittance (tick appropriate column)	Personal Use	Family Maintenance	Medical Expenses	Others			
8.	Name and address of Remitter						
	Mobile No.						
Signature of Beneficiary							

For Branch use:

Details of Photo Identification submitted by beneficiary:	
ID Number	
ID Issued by	
Validity of ID proof(if applicable)	
TMB Money Transfer Ref.Number	
Pay Out Amount	₹. (Rupees)

Signature of Officer