



<b>Name of Bank</b>	<b>Authorized Corporate Officer / Signatory</b>	<b>Code</b>	<b>MSA No.</b>	<b>DR No.</b>
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Please fill out completely								To be filled up by a representative of Globe Telecom			
Mobile Number	Branch Name	Banking Hours	Branch In-Charge/ Manager/ Contact Person	Address	Contact Number	Fax Number/s	Wallet Limit	UNIT IMEI #	SIM Serial #	PLAN	Remarks
1											
2											
3											
4											
5											
6											
7											
8											
9											
10											

**Bank Declaration**  
I hereby confirm that the above information is true and correct and I have read the Terms and Conditions stated on the attached sheet of this form, which Terms and Conditions I agree to abide by affixing my signature hereunder.

Name & Signature  <i>I have checked and verified this document and found it to be authentic and in accordance with the requirements of G-Exchange, Inc.</i>  Date	Position/Designation  <b>Approved By</b>	Date  <b>Registered By</b>	<b>Business Unit</b>
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