

Baiduri Capital Sdn Bhd
Unit 9, Ground Floor,
Block A, Kiarong Complex,
Lebuhraya Sultan Hassanah Bolkiah,
BSB BE 1318,
Brunei Darussalam

Date :

Dear Sir/Mdm,

I/We would like to request on the following services;

☐ DEPOSIT or TOP-UP

AMOUNT : SGD\$ _____

☐ WITHDRAWAL

AMOUNT : SGD\$ _____

Baiduri Capital Trading Account Number :

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Bank Account Number :

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Bank Account Name :

Yours faithfully

Client's Name : _____

I/C :

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For Office Use	
Handled by :	Name and Signature
Requested Channel : Date : _____ Time : _____ <input type="checkbox"/> Phone Call <input type="checkbox"/> Email <input type="checkbox"/> Branch	
Authorized & SV by :	Name and Signature