

# REFERENCE FORM

From (Referee)

Name .....

Date .....

Address .....

Phone No. ....

To: **PERSONAL TRUST MICROFINANCE BANK LIMITED**

Dear Sirs,

.....  
**NAME OF APPLICANT**

The above named individual/Company/Association wishes to open a Current Account with you. The individual/Company/Association is well known to me/us and I/We consider them suitable to maintain a Current Account with you.

The Applicant signs thus ..... We/I hereby witness signature(s) as being correct.

Our/My Bankers are:

.....  
Name of Bank

.....  
Branch

.....  
Account No.

.....  
Signature(s) of Referee

(To be completed by bank official)

FROM: **PERSONAL TRUST MICROFINANCE BANK LIMITED**

To: (Referee's Bank)

Please verify the signature(s) of your customer as above

.....  
Signed

(To be completed by bank official)

FROM:

To: **PERSONAL TRUST MICROFINANCE BANK LIMITED**

.....  
Signature and stamped by Authorised Signatory

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