## **Letter of Indemnity**

Date			
The Head of Interna	ational Banking	g Dividion	
International Banki	ng Division		
I,		, passport number	
hereby confirm that	t Mr./Ms	, having Photo ID r	
	_ have a bonaf	fide relationship with me, will act as the fac	cilitator for funds to be
remitted/deposited	in an Internatio	onal Banking with Meghna Bank PLC.	
I agree to indemnif	y and hold harn	nless the Bank from any claims or liabilitie	es related to the funds,
per FE Circular No	. 19 dated Nove	ember 29, 2023 and Offshore Banking Act	, 2024
All information pro	vided is accura	ate and true.	
Signature			
Name of the Remit			
Contact Number	•		
e-mail	:		