

COLLECTION ORDER

Drawer _____ _____ Account No. _____ Amount (in words and figures) _____ _____ Drawee _____ _____ _____	Drawee's Bank _____ _____ Address _____ _____ _____ Swift _____ Account No _____ _____ Maturity: <input type="checkbox"/> at sight <input type="checkbox"/> ___ days after sight <input type="checkbox"/> at the latest on _____ <input type="checkbox"/> _____
--	---

Documents:	original	copy	Documents	original	copy
Draft					
Invoice			Packing List		
Bill of Lading			Certificate of Quality		
Airway Bill			Certificate of Origin		
Railway Bill			Phytosanitary Certificate		
Insurance Policy/Certificate			Health Certificate		

Please follow the instructions marked [X]:
 THE DOCUMENTS ARE TO BE RELEASED TO THE DRAWEE AGAINST
 payment acceptance of draft

Additional instructions

Bank charges:
 AS "NORVIK BANKA" for Drawer's account for Drawee's account
 Drawee's Bank for Drawer's account for Drawee's account

Remittance instructions

Signature _____