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Form I

THE BANK OF ZAMBIA (MONITORING OF BALANCE OF PAYMENTS) REGULATIONS, 2013

EXPORT/RECEIPT MONITORING FORM

1. Exporter/ Recipient: Name		ZAMBIA EXPORTS		2. TPIN	X22225555000	
Physical Address		PLOT 22 NKANA STREET, KITWE		3. Sector	Agriculture, forestry, fis	
Telephone		212 300000		4. Invoice Number	ZM00001	
Email		Zambia.exports@zm.		5. Invoice Date	04.07.2013	
6. Paying Bank (When Applicable)		FNB Botswana		7. Value of Exports in Words	ONE HUNDRED THOUSAND ONLY.	
8. Value of Exports in Figures	Currency (USD, ZMW, etc.)	USD				
	Amount	100,000.00				
9. Name of Local Commercial Bank / Branch		FIRST NATIONAL BANK ZAMBIA LTD				
10. Account Name to Credit for Transfer		ZAMBIA EXPORTS		11. Port of Exit	KAZUNGULA	
12. Account Number to Credit for Transfer		6200000000USD				
13. \$200,000 and above (By Letter of Credit) LC Ref. No. (When Applicable)				14. \$20,000 and above (Electronic Funds Transfer) EFT. No. (When Applicable)	EFT	
15. Issuing/ Confirming Bank						
16. Country of Final Destination		Botswana				
17. Description of Goods/Services Exported (for additional information, use Form I Continuation)	Grade	Weight	Package/Container No.	Currency (USD, GBP etc.)	Unit Price	Transaction Value
VEGETABLES		10MT	200 BOXES	USD		100000.00
Services (Type of Service)						
18. Name of Importer		BOTSWANA SUPERMARKETS				
19. Name of Importer's Representative		JOHN				

20. Declaration

I/We ZAMBIA EXPORTS (Exporter) hereby declare(s) that the foreign currency proceeds of the sale or disposal of the goods described above have been/will be received in the Republic of Zambia from a person/institution outside the Republic of Zambia within one hundred and twenty (120) days from the date of shipment and will be deposited in our bank and account number as indicated on this form.

I MR FRED EXPORTS do hereby declare that the information given above is true and correct to the best of my knowledge and belief.

Signature

Date and Place of Signature Date:04.07.2013 Place: KITWE

Name of Authorised Signatory

Official Use Only

Financial Service Provider			Zambia Revenue Authority		
21. Date Application Received			27. Date Application Received		
22. Received By (Name)			28. Name of ZRA official		
23. Application Checked for Correctness and Completeness	Yes		29. Goods to be exported verified	Yes	
	No			No	
24. Signature			30. Signature		
25. Date			31. Date		
26. Stamp of Commercial Bank			32. Stamp of Zambia Revenue Authority		

Acquital of export proceeds

Payment Details	Full Payment	Payment Date	Amount	Electronic Funds Transfer Number
	Stamp of Commercial Bank			
		Name and Signature of Exporter:		
		Name and Signature of Commercial Bank Representative:		
		Date:		