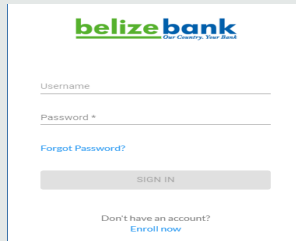




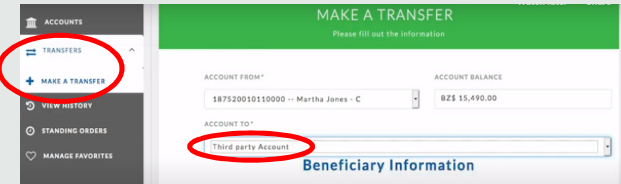
Belize Bank: Third Party Transfer

1. Enter: Username and Password



belizebank
 Username
 Password *
 Forgot Password?
 SIGN IN
 Don't have an account?
 Enroll now

2. Select Transfers and click Make a Transfer
3. Account From: Select your account (your Account Balance will appear), Account To: Third Party Account



ACCOUNTS
 TRANSFERS
 MAKE A TRANSFER
 VIEW HISTORY
 STANDING ORDERS
 MANAGE FAVORITES

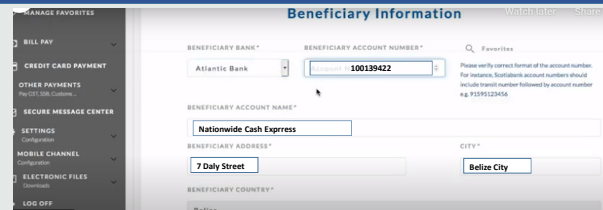
MAKE A TRANSFER
 Please fill out the information

ACCOUNT FROM*
 187520010110000 -- Martha Jones - C BZ\$ 15,490.00

ACCOUNT TO*
 Third party Account

Beneficiary Information

4. Enter: Beneficiary Bank (Atlantic/Heritage), Nationwide Account Number (100139422 for Atlantic bank or 1887 for heritage, Account Name (Nationwide Cash Express Limited), Address (7 Daly Street), City (Belize City), Country (Belize)



Beneficiary Information

BENEFICIARY BANK*
 Atlantic Bank

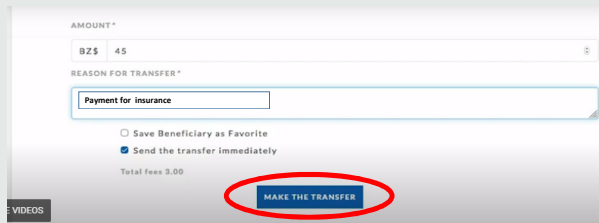
BENEFICIARY ACCOUNT NUMBER*
 100139422

BENEFICIARY ACCOUNT NAME*
 Nationwide Cash Express

BENEFICIARY ADDRESS*
 7 Daly Street

CITY*
 Belize City

5. Enter: Amount, Reason for Transfer (Payment for insurance)
6. Select Make the Transfer



AMOUNT*
 BZ\$ 45

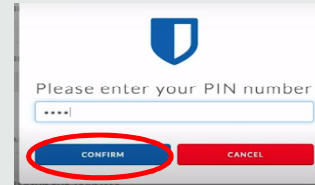
REASON FOR TRANSFER*
 Payment for insurance

Save Beneficiary as Favorite
 Send the transfer immediately

Total fees 5.00

MAKE THE TRANSFER

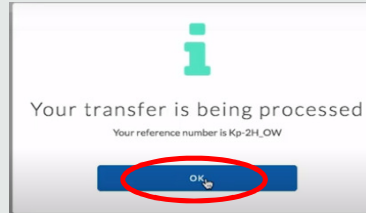
7. Enter: your PIN number and select Confirm



Please enter your PIN number
 [****]

CONFIRM CANCEL

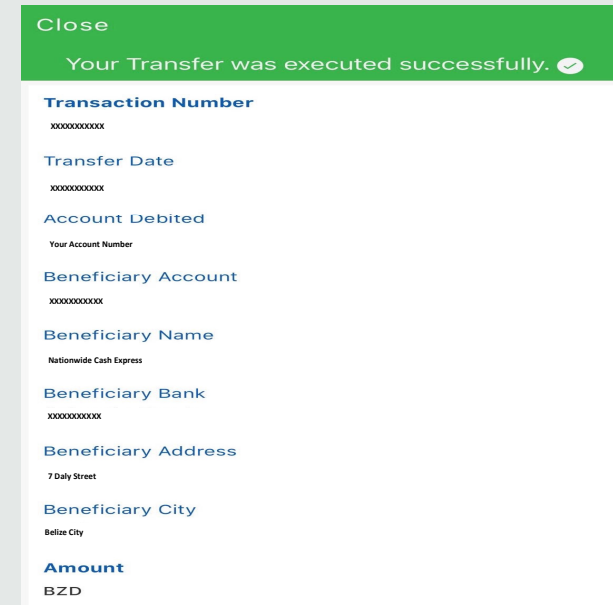
8. A pop-up message 'Your transfer is being processed' will appear. Select OK.



Your transfer is being processed
 Your reference number is Kp-2H_OW

OK

9. Below screen will appear with 'Your Transfer was executed successfully'.
10. Take a picture / screenshot.



Close
 Your Transfer was executed successfully. ✓

Transaction Number
 XXXXXXXXXXXX

Transfer Date
 XXXXXXXXXXXX

Account Debited
 Your Account Number
 XXXXXXXXXXXX

Beneficiary Account
 XXXXXXXXXXXX

Beneficiary Name
 Nationwide Cash Express

Beneficiary Bank
 XXXXXXXXXXXX

Beneficiary Address
 7 Daly Street

Beneficiary City
 Belize City

Amount
 BZD

11. End:
Customer can take a picture of the receipt and send to 626-4093
WhatsApp/ email:
nce@icbinsurance.com