

# Request for Amendment to a Documentary Credit

Please amend our Documentary Credit as detailed below.

Mark box for amendment requested with a '✓'.

Date

<input type="checkbox"/> By Mail	<input type="checkbox"/> Cable	<input type="checkbox"/> SWIFT MT 707	<input type="checkbox"/> Priority	<input type="text"/> / <input type="text"/> / <input type="text"/>
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<b>To:</b>	<input type="text"/>
	<input type="text"/>
	<input type="text"/>

<b>20</b>	<input type="checkbox"/> Credit number
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<b>21</b>	<input type="checkbox"/> Receiver's reference
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<b>31C</b>	<input type="checkbox"/> Date of credit
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<b>59</b>	<input type="checkbox"/> Original Beneficiary
	<input type="text"/>
	<input type="text"/>

<b>31E</b>	<input type="checkbox"/> Extend expiry date to: <input type="text"/> / <input type="text"/> / <input type="text"/>
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<b>32B</b>	<input type="checkbox"/> Increased by:	Currency	Amount
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<b>34B</b>	New total	Currency	Amount
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<b>33B</b>	<input type="checkbox"/> Decreased by:	Currency	Amount
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<b>34B</b>	New total	Currency	Amount
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<b>39</b>	<input type="checkbox"/> Amount tolerances:
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<b>44</b>	<input type="checkbox"/> Shipment from:
	To:

<b>79</b>	<input type="checkbox"/> Other amendments
	<input type="text"/>
	<input type="text"/>
	<input type="text"/>

<b>72</b>	<input type="checkbox"/> Bank to bank information
	<input type="text"/>
	<input type="text"/>
	<input type="text"/>

All other terms and conditions remain unchanged.

Customer's signature	Date	Manager's signature	Date
<input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>

**BANK USE ONLY – Checklist**

Liability recorded	Card amended	Charges paid	Manager's initials
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>