



# BACK DATED TRANSFER AUTHORITY

Tel: 1300 309 930

customer.service@loscam.com

Fax: 03 9843 3701

**Loscam can not process transfers greater than 2 months**

Please complete this form and return to Loscam Customer Service with copies of the relevant transfer

Post to: PO Box 605, Box Hill BC, 3128 or Fax: 03 9843 3701

Docket Number	Original Effective Date	New Effective Date

### SENDING PARTY:

Loscam Account Number: \_\_\_\_\_

Company Name: \_\_\_\_\_

Authorising Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

Date: \_\_\_\_\_

### RECEIVING PARTY:

Loscam Account Number: \_\_\_\_\_

Company Name: \_\_\_\_\_

**I accept the above mentioned transfers with the new effective date (s)**

Authorising Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

Date: \_\_\_\_\_