Date:

**Head of Card Division** Modhumoti Bank PLC. Head Office, Dhaka.

## Subject: Request for enhancement of transaction limit for "School Banking Debit Card".

Dear Sir,

With due respect, I am maintaining a School Banking Account on behalf of my Son/Daughter. Now, I am applying on behalf of my son/daughter to enhance the transaction limit for ATM and or POS transaction for ATM Debit Card up to **Tk. 5000/= (Taka Five thousand only) per month.** 

The details of the particula	rs are:					. /	∿			P			
Account Holder Name			e				••••						
Guardian Name				.A	••••			••••					
Account Number		1 2	3			<i>9</i> //							
Name on Card													
													·1
Card Number	9 2 9 5	0 1 6	0	*	*	*	*	*	*				
Your kind co-operation in	this regards will be high	ghly appred	ciated.										
Your Faithfully													
Guardian Signature	Signature Verified by						Branch Manager with seal						
CARD DIVISION Use Only													
CBS-Checked By									(	CMS	-Inj	out E	By