

MONEYCARD BUSINESS FORM

Company /Individual Name: _____

Region: _____

Office Location/Physical Address: _____

Mailing Address: _____

Phone number: _____

E-mail address: _____

Business Background/interest:

(Please check box)

- Bank/Financial Institution
- Telecommunication
- Investor
- Fintech
- Service provider
- Online Merchant/Store
- Distributor Retailer Others:
Please specify _____

How you heard about MoneyCard:

(Please specify for each)

- Electronic Media
- Print Media
- Social Media
- Company Website
- Friends/Family
- Others
Please specify _____



MoneyCard

MoneyCard Limited

Box MD 97 Madina - Accra, Tel: +233 2666000905 / 233 269627027

Email: info@moneycardonline.com Website: www.moneycardonline.com

Pre-Order MoneyCard

Check box	Value	Quantity	Sum
<input type="checkbox"/>	1		
<input type="checkbox"/>	2		
<input type="checkbox"/>	5		
<input type="checkbox"/>	10		
<input type="checkbox"/>	20		
<input type="checkbox"/>	50		
<input type="checkbox"/>	100		
<input type="checkbox"/>	200		
<input type="checkbox"/>	500		
<input type="checkbox"/>	1000		
TOTAL			

Select Bank: (please check box)


- Barclays Bank
- Ecobank
- GT Bank
- GCB Bank

Bank Receipt Number/ Reference Number _____

Super-Agent Code (Vodafone Cash): D002000

For enquiry:

info@moneycardonline.com

 Whatsapp: +233504586637

Office: 030 231 8036

www.moneycardonline.com

Your money. Your freedom