



བགྲིས་བཅད་དོན་བརྒྱུད་འབྲེལ་ཚད་འཛིན།།

Tashi InfoComm Limited

E-Top Up Reversal Application Form

Name :	
Mobile number:	
E-Top up agent ID:	
Location/Region:	

I, _____, would like to apply for E-top UP reversal of Nu. _____, (in word: _____) that has been mistakenly transferred OR recharged to mobile number:- _____ on date: _____ time: _____ .

Disclaimer:

The applicant acknowledges that all the information provided are true and that the recipient has been communicated.

Reversal applied by:

Verified & Approved by:

Name:

(Signature, Name & Seal)

I/D Card No.

Regional Manager

Mobile No.

Region:

Address: