FINANCIAL IDENTIFICATION

CAPITAL LETTERS and LATIN CHARACTERS when filling in the form.

BANKING DETAILS ①					
ACCOUNT NAME ②					
IBAN/ACCOUNT NUMBER ③					
CURRENCY	BRANCH CODE ④				
BIC/SWIFT CODE					
BANK NAME ADDRESS OF BANK BRANCH					
STREET & NUMBER TOWN/CITY COUNTRY	POSTCODE				
ACCOUNT HOLDER'S DATA AS DECLARED TO THE BANK					
ACCOUNT HOLDER STREET & NUMBER TOWN/CITY COUNTRY	POSTCODE				
REMARK					
BANK STAMP + SIGNATURE OF BANK REPRES	SENTATIVE (5) DATE (Obligatory) SIGNATURE OF ACCOUNT HOLDER (Obligatory)				
1) Enter the final bank data and not the data of					

- 2) This does not refer to the type of account. The account name is usually the one of the account holders. However, the account holder may have chosen to give a different name to its bank account.
- ③ Fill in the IBAN Code (International Bank Account Number) if it exists in the country where your bank is established
- (4) Only applicable for US (ABA code), for AU/NZ (BSB code) and for CA (Transit code). Does not apply for other countries. (5) It is preferable to attach a copy of RECENT bank statement. Please note that the bank statement has to confirm all the information listed above under 'ACCOUNT NAME', 'ACCOUNT NUMBER/IBAN' and 'BANK NAME'. With an attached statement, the stamp of the bank and the signature of the bank's representative are not required. The signature of the account-holder and the date are ALWAYS mandatory.

LEGAL ENTITY

CAPITAL LETTERS and LATIN CHARACTERS when filling in the form.

NATURAL PERSON

I. PERSONAL DATA						
FAMILY NAME(S) ①						
FIRST NAME(S) ①						
DATE OF BIRTH	DD MM					
PLACE OF BIRTH		YYYY		COUNTRY OF BIF	RTH	
(CITY, VILLAGE)						
TYPE OF IDENTITY DOCI		PASSPORT		DRIVING LICENC	E ②	ОТНЕ
IDENTITY DOCUMENT N	IUMBER					
PERSONAL IDENTIFICAT		3)				
PERMANENT PRIVATE ADDRESS						
POSTCODE		P.O. BOX			CITY	
REGION (5)				COUNTRY		
PRIVATE PHONE						
PRIVATE E-MAIL						
II. BUSINESS DATA Do you run your own without a separate legal	busii BU	supporting	-	ess data and attach copies	of official	
personality (e.g. sole trac NUMBER	lers, (if ap	(if applicable) self-employed etc.) and you provide as such services to the VAT				
Commission, other	REC	Institutions, REGISTRATION NUMBER				
Agencies and EU-Bodies?	ll l	FOISTDATION	CITY			
YES N	IO PLAČE OF R	EGISTRATION	:CITY		COUNTRY	
					COUNTRY	
DATE		SIG	GNATURE			

¹ As indicated on the official document.

⁽²⁾ Accepted only for Great Britain, Ireland, Denmark, Sweden, Finland, Norway, Iceland, Canada, United States and Australia.

- 3 Failing other identity documents: residence permit or diplomatic passport.
- **4** See table with corresponding denominations by country.
- (5) To be completed with Region, State or Province by non EU countries only, excluding EFTA and candidate countries.

LEGAL ENTITY

Please use CAPITAL LETTERS and LATIN CHARACTERS when filling in the form.

PRIVATE/PUBLIC LAW BODY WITH LEGAL FORM

	<u> </u>			<u> </u>	
OFFICIAL NAME ①					
BUSINESS NAME (if different)					
ABBREVIATION	l				
LEGAL FORM					
ORGANISATION TYPE	FOR-PROFIT				
	NON FOR PROFIT	NGO ②	YES NO		
MAIN REGISTRATION I	NUMBER ③				
SECONDARY REGISTRA	TION NUMBER				
PLACE OF MAIN	CITY				
REGISTRATION	COUNTRY				
DATE OF MAIN REGIST	RATION DD MM	YYYY			
VAT NUMBER					
ADDRESS OF HEAD OFFICE					
POSTCODE	P.O. BOX		CITY		
COUNTRY			PHONE		
E-MAIL					
		1			
DATE					

SIGNATURE OF AUTHORISED REPRESENTATIVE	STAMP

- 1 National denomination and its translation in EN or FR if existing.
- ② NGO = Non-Governmental Organisation, to be completed if NFPO is indicated.
- **③** Registration number in the national register of companies.