

| Full name of bank or financial institution - Mandatory  |
|---|
|   |
|   |
| Branch Name & complete address of bank - Mandatory  |
|   |
|   |
| Beneficiary Bank Identification Code (Swift BIC) -  |
| full 11 character BIC required - if 8 characters last 3 = XXX - Mandatory   |
|   |
| Name of account holder (maximum 35 characters Alphabetic including spaces ) - Mandatory                           |
|   |
| A constant assessment and   |
| Account number - maximum 34 digits (can be Alphanumeric), no hyphen '-' or slash '/' or space allowed - Mandatory |
|   |
|   |
| Currency the account is hold in / If left blank local aurrency will be used)                                      |
| Currency the account is held in ( If left blank local currency will be used)                                      |
|   |
|   |
| I wish the payment to be paid by direct deposit to the account noted above.                                       |
| CAE/IPI Number  |
|   |
| Name 2  |
| Name Signature  |