

Moving money where it's needed

Payment Mandate GREECE for payment in EUR

Application for payment by direct deposit into a bank account

NEW [✓] AMENDMENT [✓]		
Fill in the form in CAPITAL LETTERS. Complete account number from the left & include any dashes (-). Complete Parts 1 and 2. Your bank will help you if you are not sure of the branch/bank codes. Sign Part 3. If you have nominated a cheque account, please attach a cheque, clearly marked 'CANCELLED', to this form.		
PART 1		
Your Name: Forename(s) Surname		
Forename(s) Surname Your Address:		
Your Reference Number if you have FI2/	,	
PART 2		
Name of Bank or Financial Institution:		
Name of Branch of Bank or Financial Institution:		
Full Address of Bank or Financial Institution:		
Ba		
Ac		
SWIFT Code of institution where your account is held or head office:		
IBAN = International Bank Account Number		
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The Account is in the Name(s) of:		

PART 3 Please sign below

Please pay my pension payments by direct deposit to the account noted above:

Signature:	Date:		
	FOR OFFICE USE ONLY		
Created (✔): Amended (✔):	Inputter:	Date:	
Other (specify):	Authoriser: Date:	_	