

Moving money where it's needed

Payment Mandate GERMANY Tor payment in EUR				
Application for payment by direct deposit into a bank account PLEASE INDICATE WHETHER THIS IS A NEW INSTRUCTION OR AN AMENDMENT TO EXISTING ACCOUNT DETAILS				
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 Your Address:				
Your Reference Number if you have one: FI2/				
PART 2				
Name of Bank or Financial Institution:				
Name of Branch of Bank or Financial Institution:				
Full Address of Bank or Financial Institution:				
Bank Code/Bank Leitzahlen Buch (BLZ):				
Account Number/Konto Number:				
SWIFT Code of institution where your account is held or head				
IBAN: DE				
IBAN = International Bank Account Number				
The Account is in the Name(s) of:				
PART 3 Please sign below				
Signed on behalf of the pensioner for pension payments by direct deposit to the account noted above:				
Signature: Date:				

FOR OFFICE USE ONLY				
Created (✓):	Inputter:	Date:		
Other (specify):	Authoriser:	Date:		