## **PLEASE CONFIRM** (Tick one ✓) THE TYPE OF NEW AMENDMENT **CURRENCY USED BY YOUR** HOW TO FILL IN THE FORM **ACCOUNT** • Please fill in the form in CAPITAL LETTERS. • Fill in Parts 1 and 2. Your overseas bank will help you if you are not sure. ....... · Sign Part 3. PART 1 Forename(s) Surname Your Address: Your Reference Number: Scheme: PART 2 Full Name and Address of Bank or Financial Institution International Bank Account Number (IBAN) MANDATORY Bank Identification Code (Swift BIC) MANDATORY Name of Account Holder MANDATORY Account type :(Tick one ✓) Mandatory **01 Savings Account 02 Checking and Current Account** 03 Others **ONLY MANDATORY FOR NON EURO PAYMENTS** Bank code Branch code **Check digits** Account number ONLY MANDATORY FOR NON EURO PAYMENTS PART 3. Please read and sign below. I wish for my payment(s) to be paid by direct deposit to the account noted above. Signature Date

**IMPORTANT** 

**CITI MANDATE: (FRANCE-SEPA)**