

**INFORMATION FORM FOR PAYMENTS ABROAD**

**SUPPLIER**

SUPPLIER NAME :

ADDRESS :

POSTAL CODE :

CITY :

COUNTRY :

VAT NUMBER :

**SUPPLIER'S BANK**

NAME OF THE BENEFICIARY / SUPPLIER :

NAME OF THE BANK :

ADDRESS BANK :

ACCOUNT NUMBER :

SWIFT / BIC CODE :

IBAN :

OTHER CODES (optional) :

**INTERMEDIARY BANK (if necessary)**

NAME OF THE BANK :

ADDRESS BANK:

ACCOUNT NUMBER :

SWIFT / BIC CODE:

IBAN :

OTHER CODES (optional) :

Specify the payment currency :