

Bundesdruckerei GmbH
FP FA
Kommandantenstraße 18
10969 Berlin
Germany

Customer number: _____
(if applicable, authority code): _____

SEPA Direct Debit Mandate

Creditor Identifier DE38ZZZ00000498059

Mandate Reference WILL BE COMMUNICATED TO YOU UNDER
SEPARATE COVER

By signing this mandate form, you revocably authorize (A) Bundesdruckerei GmbH to send instructions to your bank to debit your account and (B) your bank to debit your account in accordance with the instructions from Bundesdruckerei GmbH.

Note: As part of your rights, you are entitled to a refund from your bank under the terms and conditions of your agreement with your bank. A refund must be claimed within 8 weeks starting from the date on which your account was debited.

⇒ **Please fill in ALL FIELDS completely!**

Account holder: _____

Street and No.: _____

Postcode and city: _____

Country: _____

Your account

Name of your bank: _____

IBAN: _ _ _ _ | _ _ _ _ | _ _ _ _ | _ _ _ _ | _ _ _ _ | _ _ _ _

BIC/Swift: _ _ _ _ _ _ _ _ | _ _ _ _

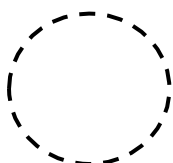
Direct debit notifications:

Contact: _____

Phone: _____

E-mail: _____

**Commencement of mandate
from date of invoice:**



Official seal/company stamp

Place/date/signature