

Specimen signature card for transaction account for national payment transactions

Please complete the Card in clear and legible capital letters

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Client information	
Cheffi illioithation	

Name of business entity	Name of business entity																				
Head office Country of head office (for non-residents)				Address																	
Contact telephone	E-mail			Business entity identification number																	
National payment account number		5 4	0	-																	
Persons authorized to manage the assets:																					
Signatory first name and surname																					
Citizens' Register number (JMBG)/ Passport number:			Address																		
Method of signing individually	collectively		Signature and stamp of the authorized signatory (if the stamp number is different from the main stamp)								STAMP										
Signatory first name and surname																					
Citizens' Register number (JMBG)/ Passport number:			Addı	ress																	
Method of signing individually	collectively		Signature and stamp of the authorized signatory (if the stamp number is different from the main stamp)							STAMP											
Signatory first name and surname																					
Citizens' Register number (JMBG)/ Passport number:			Addı	ress																	
Method of signing individually	collectively		Signature and stamp of the authorized signatory (if the stamp number is different from the main stamp)							STAMP											
Signatory first name and surname																					
Citizens' Register number (JMBG)/ Passport number:			Address																		
Method of signing individually	collectively		Signature and stamp of the authorized signatory (if the stamp number is different from the main stamp)					STAMP													
Signatory first name and surname																					
Citizens' Register number (JMBG)/ Passport number:			Addı	ress																	
Method of signing individually	collectively			nature and ne stamp nu													STA	MP			
Signatory first name and surname																					
Citizens' Register number (JMBG)/ Passport number:			Addı	ress																	
Method of signing individually	collectively			nature and ne stamp nu													STA	MP			
Signature of the authorized representative If the use of stamp/seal is required by the law, other r (Articles of Association and similar) of the legal entity obliged to use it in the business relationship with the To be completed by the Bank	which you are representing								5	STAM	Р										
Date			Sign	nature of	he Ba	nk's au	thorize	d pers	on												
Number of the box for disposal of bank statements																					
I confirm that the client signed documents in my	presence		STAMP																		