

Specimen signature card for transaction account for international payment transactions

Please complete the Card in clear and legible capital letters

Client information

Name of business entity			
Head office Country of head office (for non-residents)		Address	
Contact telephone	E-mail	Business entity identification number	
International payment account number	M E 2 5 - 5 4 0 -		

Persons authorized to manage the assets:

Signatory first name and surname			
Citizens' Register number (JMBG)/ Passport number:		Address	
Method of signing	<input type="checkbox"/> individually	<input type="checkbox"/> 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	<input type="checkbox"/> individually	<input type="checkbox"/> collectively	Signature and stamp of the authorized signatory (if the stamp number is different from the main stamp)
			STAMP

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Signatory first name and surname			
Citizens' Register number (JMBG)/ Passport number:		Address	
Method of signing	<input type="checkbox"/> individually	<input type="checkbox"/> collectively	Signature and stamp of the authorized signatory (if the stamp number is different from the main stamp)
			STAMP

Signature of the authorized representative			
			STAMP

If the use of stamp/seal is required by the law, other regulation or by the other general act (Articles of Association and similar) of the legal entity which you are representing, you are obliged to use it in the business relationship with the Bank

To be completed by the Bank

Date	Signature of the Bank's authorized person
Number of the box for disposal of bank statements	
<input type="checkbox"/> I confirm that the client signed documents in my presence	STAMP