ACCOUNTANT GENERAL OF THE REPUBLIC OF CYPRUS

1441 - NICOSIA

AUTHORISATION FOR PAYMENTS BY FIMAS

I / We hereby authorize you to pay by bank transfer to the account shown below, any amount payable to me / us, by any Government Office, through the **Integrated Financial Management System (FIMAS)** of the Treasury of the Republic.

For this purpose I / we present below the minimum information needed of this bank account held in EURO. In addition, I / we attach a copy of the statement/certificate from the bank, (which does not include any transactions) showing the name of the Bank, the owner / beneficiary of the account and the name of the branch (where applicable), as well as the **International Bank Account Number (IBAN).**

This authorisation will remain in force unless a written notice is given from me / us.

NAME/ORGANISATION NAME	
PHONE NUMBER	
IDENTIFICATION NUMBER (for Individuals)	
REGISTRATION NUMBER (for Organisation)	
ADDRESS (Street Address & Number or P.O. Box)	
POSTAL CODE	
CITY/TOWN	
BANK NAME	
INTERNATIONAL BANK ACCOUNT NUMBER	
CY	
<u>Note:</u> The bank account number (IBAN) must be in the name of the beneficiary. An acceptable bank account is if the natural person/beneficiary holds a joint account with another natural person, provided that the photocopy of the bank statement or the bank statement attached to this authorization will show clearly the name of the beneficiary. If the beneficiary is a legal person, then the bank account must necessarily be wholly owned by the legal person and not jointly with any others.	
	(Seal)
Signature of Authorising Person	Name of Authorising Person
Date:/20	
(If the case of legal persons, this authori	sation must be stamped next to the name of the authorising

(If the case of legal persons, this authorisation must be stamped next to the name of the authorising person with the legal person's seal)