
Unique Mandate Reference (UMR) : RUM1301-0008-0

Creditor Identifier (ICS) : ICS123456

Creditor's Name : MyBigCompany

Address :
21 Jump street
MyTown, 75500

By signing this mandate form, you authorize (A) MyBigCompany to send instructions to your bank to debit your account and (B) your bank to debit your account in accordance with the instructions from MyBigCompany. 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. Your rights regarding the above mandate are explained in a statement that you can obtain from your bank.

(B) Please complete all the fields marked *

Your name * : Magic Food Store
Address : 65 holdywood boulevard
123456 BigTown
Your Bank Account Name (IBAN) * : ES80 2310 0001 1800 0001 2345
Your Bank Identifier Code (BIC) * : PSPBFIHH
Type of payment * : Reccurrent payment or
 One-off payment

Date of signature

Signature

Please return this mandate form by email to
myemail@mybigcompany.com or by mail to:

MyBigCompany
21 Jump street
MyTown, 75500