



Debitor-Identifier: DE71ZZZ00000112278

The individual reference number will be communicated separately by SchunterNet e. V.

Banking information

Bank name

BIC

IBAN

Fill out if you are not the account owner or this is a non-german bank account.

First name

Surname

Email address

Street and house number

Area code

City

Country

Direct debit authorization

Hereby I formally authorize SchunterNet e. V. to collect payments that are due from my account until I formally revoke this authorization.

I will order my bank to accept the collection of payments from SchunterNet e. V.

Note: Within eight weeks after the collection of the payment I can request the reimbursement of the payment.

For this the contract terms of my credit institute are important.

Before the first payment will be collected from my account I will be informed by SchunterNet e. V. of this.

.....
Location, date

.....
signature