

# Standing order

(Please use block capitals.)

- New standing order (term to maturity min. 6 months)**      **Partner number (internal)** \_\_\_\_\_
- Change standing order no.** \_\_\_\_\_       **Cancel standing order no.** \_\_\_\_\_
- Suspend standing order no.** \_\_\_\_\_      **from** \_\_\_\_\_ **to** \_\_\_\_\_ (dd.mm.yyyy)

## 1. Customer

Postal account number/IBAN at PostFinance \_\_\_\_\_

Last name \_\_\_\_\_ First name \_\_\_\_\_

or company \_\_\_\_\_

Street \_\_\_\_\_ No. \_\_\_\_\_ P.O. Box \_\_\_\_\_

Postcode \_\_\_\_\_ Location \_\_\_\_\_

Telephone \_\_\_\_\_

## 2. Payment

- to an account in Switzerland (incl. Liechtenstein)       Cash payment to beneficiary abroad
- to an account abroad       Urgent (not possible for all countries)       Our cost (abroad only)

## 3. Amount

Amount \_\_\_\_\_ Currency \_\_\_\_\_ Target currency (if different) \_\_\_\_\_

## 4. Payment due date/frequency

- for the first time on \_\_\_\_\_ for the last time on \_\_\_\_\_ (dd.mm.yy)       until revoked
- twice a month       monthly       every two months       quarterly       semi-annually       annually
- If the execution date falls on a Saturday, Sunday or public holiday, execute the order in advance:       yes       no

## 5. Payable to (attach available copy of advice slip – so the order can be executed correctly)

Beneficiary Account \_\_\_\_\_

The transfer to a domestic bank account is only possible with IBAN. (Except for the orange payment slip)

Beneficiary's name \_\_\_\_\_

Street \_\_\_\_\_ No. \_\_\_\_\_

Postcode \_\_\_\_\_ Location \_\_\_\_\_

Country (abroad only) \_\_\_\_\_

Reference \_\_\_\_\_

Name of financial institution \_\_\_\_\_

Postcode \_\_\_\_\_ Location \_\_\_\_\_

IID/BIC of the financial institution \_\_\_\_\_

## 6. Messages for the beneficiary of the credit (not possible for orange inpayment slips with a reference number)

(Max. 140 characters) \_\_\_\_\_

Location \_\_\_\_\_ Date \_\_\_\_\_

Signature\* \_\_\_\_\_ Signature\* \_\_\_\_\_

\* Signature of the holder/body or authorized person. Two signatures are required for joint signatory powers.

**Please send the form to:**  
PostFinance Ltd, Scan Center, 3002 Berne

### For internal purposes

Order number	_____
Concluding office	_____
Locality code	_____
Staff number	_____

