

# 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)  
 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.  
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

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

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



### For internal purposes

Order number	_____
Concluding office	Locality code _____
	Staff number _____