LATVIJAS BANKA
EIROSISTĒMA

TARGET2 form for collection of Static Data

- Direct Participant Mandate for billing -

A,B	**BIC:**		**TEST BIC:**
C,D,E	☐ **New**	☐ **Modify**	☐ **Delete**
F,G,H	◯ **Production**	◯ **Test & Training**	**Date:**
I,J	**Ref:**	**rel. Ref:**	
K,L	**Activation date:**	**Responsible CB:** - Select one Entry -	

This form shall be submitted only in case the PM account to be debited for the monthly billing of invoices is different than the underlying PM account that is billed. The form shall be signed by the Participant that is billed alongside with the Participant that owns the account to be debited.

	1. Participant account to be billed	
10	Participant BIC:	
11	Name of Participant _____ _____ _____	

	2. Participant account to be debited	
20	Participant BIC:	*Enter Billing Data Participant*
21	Name of Participant _____ _____ _____	

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Sonnemannstrasse 20, 60314 Frankfurt am Main, Germany

http://www.ecb.int

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☐ New	☐ Modify	☐ Delete
BIC:	TEST BIC:	Activation date:

Both parties confirm that the monthly amount that is billed to the Participant named in the field 10 shall be debited from the Participant named in the field 20.

The Undersigned declare(s) to have the full capacity and authority to execute the TARGET2 form for and on behalf of the Central Bank requesting activation of the registration.

Participant of the billed account

Date, Name(s) Signature(s)

Participant of the account to be debited

Date, Name(s) Signature(s)

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