

Amendment / Change Request of Basic Claims Data

Please send the complete document

via E-Mail to support-haendler@s-publicservices.de

via Fax to +49 7554 97090-09

via letter to S-Public Services GmbH, Hauptstraße 27 a, 88699 Frickingen

1. Contract Owner

| Customer No. | | |
|----------------|------------|--|
| Corporate Name | | |
| Surname | First Name | |

Please fill in only the relevant section only!

Caution! For changes reg. your credit card acquiring contract, please refer to the respective form of BSPAYONE, which you can download here: https://www.bs-card-service.com/de/kundenservice/download-center/

| 2. New corporate data | corporate dat | ate data | corpo | New | 2. |
|-----------------------|---------------|----------|-------|-----|----|
|-----------------------|---------------|----------|-------|-----|----|

| VAT-ID | |
|---------------------------------------|---|
| Corporate Name | |
| Legal Status | |
| Company Register-No. | |
| Please contact us to request the late | npany register entry, it is mandantory to conclude a new contract! est forms and checklists. ate address, please send us a new copy of your company register entry. |
| Company Owner | |
| Contact Person | |
| Street, No. | |
| ZIP Code, Place | |
| E-Mail Contact Person | |
| E-Mail for Invoice | |
| Telephone No. | |

3. Change of URL /Website address:

| | Add | Delete |
|-----|-----|--------|
| URL | | |



| 4 New SFPA d | liraat dahit n | aandata - de | shit account |
|--------------|----------------|--------------|--------------|

Bank details for the debit account changes to:

| SEPA-Direct debit mandate | | | | | |
|--|--------------------|-----------------------|----------------------------|----------------|--|
| Creditor - ID | DE17ZZZ0000 | 00028278 | | | |
| Customer No. | | | | | |
| I authorize / we authorize the debit. Likewise, I indicate / we indicate Please note: Starting from the date | cate our credit in | institution to reeden | n the collected direct deb | its form t | he payee S-Public Services GmbH. |
| Payment Method | Recurring Pay | yment | | | |
| Bank account holder | | | | | |
| IBAN | | | | | |
| BIC | | | | | |
| Name of Bank | | | | | |
| Please file th above stated bank details in your corporate system | | | | | |
| | | | | | |
| Place, Date | | uthorized signature | | Name ir | n Block letters |
| 5. New Bank account details Credit Account Bank details for crediting payments changes to: | | | | | |
| Project-ID | | | (fo | or different p | projects, please provide all project ID's) |
| Bank account holder | | | | DIC | T |
| IBAN Name of Bank | | | | BIC | |
| 6. Confirmation Place, Date | | | Authorizes signature | | |
| | | | Name in Block letters p | olus com | pany stamp |