**Top-up fund – Annex 1 – Contact / Bank details**

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| **Requesting member # 1:** Click here to enter text.  *(in alphabetical order)*  Address: Click here to enter text.  Telephone number: Click here to enter text.  Primary contact person name and email address: Click here to enter text.    Finance contact person(s) name and email address: Click here to enter text.  *(to whom payment notifications from ACT should be sent)*    **BANK DETAILS:** Click here to enter text.*(currency used for this bank account)*  *(to which funds should be sent by ACT)*  Name of beneficiary: Click here to enter text.  Name of bank: Click here to enter text.  Address of bank: Click here to enter text.  Account no. or IBAN number: Click here to enter text.  Bank swift code: Click here to enter text. |
| **Requesting member # 2:** Click here to enter text.  *(in alphabetical order)*  Address: Click here to enter text.  Telephone number: Click here to enter text.  Primary contact person name and email address: Click here to enter text.    Finance contact person(s) name and email address: Click here to enter text.  *(to whom payment notifications from ACT should be sent)*    **BANK DETAILS:** Click here to enter text.*(currency used for this bank account)*  *(to which funds should be sent by ACT)*  Name of beneficiary: Click here to enter text.  Name of bank: Click here to enter text.  Address of bank: Click here to enter text.  Account no. or IBAN number: Click here to enter text.  Bank swift code: Click here to enter text. |