Consent to Debit the Account

I hereby express my consent:										
Name and address of the payee	Ider	tifier	of th	ie pa	yee *					
□ - resident** □ - non-resident**										
to debiting the account specified below, under direct	debit	with	amo	unts	resulti	ng fi	om m	y obl	igation	is on
contractual payment dates, in accordance with invoices/								<u> </u>		
Name and address of the payer – account holder										
Account number – payer										
	_ _ _	_ _	. _ _							
□ - consumer within the meaning of the Civil Code **□ - other payers **										
Payment										
identifier***										
This document is also consent to the bank debiting my a	accour	nt, und	der di	rect c	lebit, a	as re	gards	ny ob	ligatio	ns to
the above payee.										
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For the payee										
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Consent to Del	bit tl	ne A	ccoı	ınt						
I horoby synross my consents										
I hereby express my consent: Name and address of the payee	Ider	tifier	of th	e nav	'ee *					
Thame and dualess of the payer			01 (11	c pay						
□ - resident**										
□ - non-resident**										
to debiting the account specified below, under direct contractual payment dates, in accordance with invoices/					resulti	ng fi	om m	y obl	igatior	is on
Name and address of the payer – account holder	DIIIS C	elivei	eu to	me.						
Tham can a dances of the payer account notice.										
Account number – payer										
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□ – other payers **										
Payment										
This document is also consent to the bank debiting my a	266011	t un	dor di	roct c	lobit i	20 50	aarde	my ob	ligatio	nc to
the above payee.	accour	it, uii	Jer ui	rect c	iebit, a	as re	jarus i	Hy OD	iigatio	115 10
(town and date) (sig	natur	e of th	ne pa	 /er –	accou	nt ho	 Ider,			

For the bank of the payer
*- 10-digit NIP/NIW of the payee
**- check the appropriate status
***- max. 20 alphanumeric characters