ORDER OF REGULAR MONEY TRANSFER

Fill in this form and bring its original copy to your bank. In this way your bank can send your share of donation by a direct money transfer to the Foundation Champions for Children.	You can, anyway and in any moment, cancel this order by writing to your bank. In order to complete this form don't forget to send us this document via fax or e-mail.	For information: **Fondazione Champions for Children** Via Carlo Maria Maggi, 2 - 20154 MI Tel. +39 02 8708 6989 Fax +39 02 8708 6988 e-mail address: info@chforch.org www.chforch.org

Dear Bank _____ **Agency N.** _____

Please carry out the following money transfer regularly and except for my withdrawal:

€_____ **Amount in letters**_____

Date of currency:_____ Frequency: ❒ Monthly
❒ Every 3 months
❒ Every 6 months
❒ Yearly

Reason for payment: Support to Champions for Children – Name of the supporting member

ORDINARY CUSTOMER

Name/Surname/Company_____

Address_____

Zip code_____Town_____Province_____

Fiscal Code/Vat N._____

IBAN | | | | | | | | | | | | | | | | | | | | | | | | | |

Name of the owner of the bank account (only if different from the ordinary customer)_____

BENEFICIARY

Fondazione Champions for Children
Via Carlo Maria Maggi 2 - 20154 Milano

C.F. 97423490156

Banca Popolare di Milano, Branch Sort 2

Codice IBAN: IT 14 M 0558401602 0000 0000 4500
Codice SWIFT: BPMIITMM002

Place and date _____ Signature _____