INTERNATIONAL PAYMENT MANDATE FORM



If you would like your Pension provider to instruct Western Union International Bank, UK Branch (WUIB) to pay your pension into your overseas bank account please complete the form below in BLOCK CAPITALS using black ink.			
Country	Luxembourg	Currency Code	EUR
Beneficiary D Beneficiary Name Address	etails	Pension number/Re	f number
City		Country	
Post Code/Zip Code		Email Address	
Banking Information Receiving Bank Name Receiving Bank Add	ne	Beneficiary Bank Sv	vift Code (8 or 11 characters) 11 digit is recommended
City Post Code/Zip Code		Country Currency of Accoun	t
Beneficiary Account Number (20 digit IBAN required) Account Name (Name as quoted on bank account) Type of Account (Cheque, Savings, Current etc)			
Purpose of Payment			
Declaration I hereby confirm that the information provided above is correct to the best of my knowledge, and confirm that I wish for my pension payments to be paid into the account noted above. The information you provide within this form will be used by WUIB to process your pension payments. The information you provide may be transferred to WUIB's affiliate companies and securely held in a database in the United States.			
Signature		Date:	
For Pension Provider Use Only			
Signature		Date:	

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