

## AUTHORIZATION FOR BANK DOMICILIARY SERVICES

Currency: LBP  USD  Euro  GBP 

I hereby empower the Bank mentioned below, to debit my bank account, if its situation so allows, and to pay the Creditor below, all invoices that Transmog Inc SAL presents for collection. The Bank is also allowed to make any necessary foreign currency conversions in order to make the payments. If a charge is made to my account in error, I will receive a credit for the amount due after bringing it to the attention of Transmog Inc SAL.

**DEBTOR**First Name Date Last Name Telephone 

Signature of the Debtor

Fax Building Floor: Street **BANK HOLDING THE ACCOUNT OF THE DEBTOR**Bank Approval and stamp of the  
Bank holding the accountBranch Account of the  
Debtor Information Account Name IBAN Number