

Order for the repayment of card balances (for corporate customers)

This form must be filled out, signed and submitted **by the cardholder**. For repayments of CHF/USD/EUR 50, a processing fee of CHF/USD/EUR 20 is charged. **For each card, a separate form** must be filled out and submitted. Processing can take up to four weeks. Alternatively, the balance on active cards can be reclaimed via the Swiss Bankers app or depleted through further use of the card.

Please note the following points:

- For the repayment of the card balance, the form must be signed by the authorised agent or by the controller.
- The repayment of the card balance is made exclusively to the company account specified at time of opening the contract.

Details about the card

Please enter only **the first four and last four digits** of the card number:

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Cardholder details

Title: Ms Mr

First name: _____

Name: _____

Date of birth (dd.mm.yyyy): . . .

Nationality: _____

Details of beneficiary (company)

Company: _____

Street/house no.: _____

Postcode/city, country: _____

Authorised agent

Title: Ms Mr

First name: _____

Name: _____

E-mail: _____

Phone: _____

Information on the bank transfer (corporate account)

Please ensure that the account number (IBAN) is correct and that the account is not balanced until the repayment has been made.

Account currency: CHF EUR USD

IBAN:

Name of bank:

City, country:

BIC/SWIFT/bank code (if account outside of Switzerland):

Cancellation of card

Do you wish to cancel the above-mentioned prepaid credit card once the remaining balance has been paid out?

Yes No



Your checklist

- The form has been completed in full and signed by the authorised agent or by the controller
- Official document with company stamp or alternatively a commercial register extract is attached
- A valid copy of the ID or passport of each signing person is enclosed

By signing this document, you confirm that you have attached the listed documents for repayment. The refund can only be processed if the **form is completely filled out**.

Please send this form and additional documents **by e-mail** to info@swissbankers.ch **or by post** to Swiss Bankers Prepaid Services Ltd (Liechtenstein), Austrasse 56, 9490 Vaduz, Liechtenstein.

First name, last name:

Signature or electronic signature:

Place, date:

First name, last name:

Signature or electronic signature:

Place, date:
