



SEPA Direct Debit Mandate for acquiring through Elavon

Please complete all the fields below marked * in block capitals using a ball point pen.
Do not staple forms together. Please return with your completed application form.

Creditor Identifier IE22ZZZ304604

UMR:

By signing this mandate form, you authorise (A) U.S. Bank Europe DAC to send instructions to your bank to debit your account and (B) your bank to debit your account in accordance with the instruction from U.S. Bank Europe DAC. As part of your rights, you are entitled to a refund from your bank under the terms and conditions of your agreement with your bank. A refund must be claimed within 8 weeks starting from the date on which your account was debited. Your rights are explained in a statement that you can obtain from your bank.

* Name(s) of Account Holder(s):

* Your Address: Address Line 1:

Address Line 2:

* City/postcode

*Country

* IBAN

* Swift/BIC

Creditors Name:	U.S. Bank Europe DAC Block F1,
Creditors Address Line	Cherrywood Business Park
1: Address Line	Cherrywood, Dublin 18, D18 W2X7
2: Country:	Ireland

* Type of payment: Recurrent or One-Off Payment (Please tick ✓)

* Date of signing:

* Signature(s):

Your information is processed in line with Elavon's Privacy Policy. Please visit www.elavon.ie/privacy-policy.html for further information.

U.S. Bank Europe DAC
Registered in Ireland – Number 418442
Registered Office: Block F1, Cherrywood Business Park, Dublin 18, D18 W2X7 Ireland
U.S. Bank Europe DAC, trading as Elavon Merchant Services, is regulated by the
Central Bank of Ireland.

