

KARTON DEPONOVANIH POTPISA SIGNATURE CARD

PODACI O KLIJENTU BANKE / CLIENT'S DATA

Naziv / Name		Broj računa / Acc. No.	
Matični broj / Identification number		PIB / Tax identification number	

PODACI O LICIMA OVLAŠĆENIM ZA RASPOLAGANJE SREDSTVIMA NA RAČUNU / DATA ABOUT THE PERSONS AUTHORISED TO DISPOSE OF FUNDS OF ACCOUNT

Rb / Nr	Ime i prezime / Name and Surname	Potpis / Signature	Lični broj / Personal number	Zastupnik / Legal representative	Ovlašćeno lice / Authorised person	Prokurista / Samoostalno/ Solely	Kolektivno/ Jointly	Ograničeno/ Limited	Neograničeno/ Unlimited
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Ja/Mi želim/o da ovlastim/o gore navedena lica od broja _____ do broja _____ da upravljaju gore navedenim računom tako što će se potpisivati shodno dodeljenom nivou autorizacije.
I/We would like to authorize the persons listed above from No. _____ to No. _____ to manage the above-mentioned account according to the designated level of authorization.

Pečat i potpis ovlašćenog lica banke, Datum od kog važi /
Seal and signature of the bank's authorized representative, Date valid from

Pečat i potpis ovlašćenog lica banke, Datum do kog važi* /
*Seal and signature of the bank's authorized representative, Date valid to**

* Upisuje se prilikom prestanka važenja kartona /

* To be filled out on the occasion of expiry of this Signature card

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Potpis lica ovlašćenog za zastupanje klijenta /
Signature of the client's authorized representative