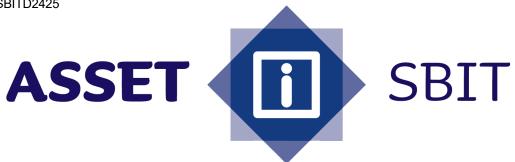
Declaratienummer: SBITD2425



Declaration Form

Date of Payment:		
Committee:		Amount
Specification:		
Total:		Euro
Name:		
IBAN:		
Signature:		
-		
To be filled in by the treasurer		
Transfer date:		
Signature (Treasurer):	Alleran	

gman