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CÓDIGO CNEA	FO-CAREM25SA-2-S0023-r0
CÓDIGO EXTERNO	
TÍTULO	FOREIGN TRADE SUPPLIER REGISTRY
FIN PREVISTO	
MOTIVO DE LA EMISIÓN	
PERMISO DE USO	USO INTERNO
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	Proyecto CAREM25 DIVISION DE COMERCIO EXTERIOR	FO-CAREM25SA-2- S0023
	FOREIGN SUPPLIER FORM	Página: 1 de 1

SUPPLIER OR COMPANY NAME:

FANTASY NAME:

NUMBER OF TAX IDENTIFICATION:

ADDRESS:

CITY AND COUNTRY:

ZIP CODE:

BANK DATA

BANK NAME:

BANK ACCOUNT NUMBER:

IBAN:

SWIFT:

CODE ABA / ROUTING:

ADDRESS OF THE BANK:

CITY AND COUNTRY:

CONTACT DETAILS – SWORN STATEMENT

NAME AND SURNAME:

TELEPHONE NUMBER:

E-MAIL:

WEB SITE:

Place and Date

Signature

*All these data must be informed in a letter of the company signed by a legal responsible and certified by bank or notary.
 **You must attach proof of tax registration.

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