

Name and surname of Employee:	
Address of Employee:	
Bank account information	
Beneficiary/ Account Name:	
Address of Beneficiary:1	
Account No:	Bank code:
Additional data for foreign payment:	
Name of financial institution:	
Address of financial institution:	
IBAN:	
SWIFT/ BIC:	
Routing/ ABA: ²	
Financial institution accepts the Czech currency: ☐ Yes ☐ No	
Date:	Signature:
¹ Fill in if the address of Beneficiary is different from	n the address of Employee
² For USA only	

Masaryk University