

Collection Order

Fax: +43 1 879 89 49 300

Email: office@b4b.or.at



Creditor Details

Company Name / Legal Form	
Street	
Postal Code / State / Country	
Telephone Number	
Fax / E-mail	
IBAN	
BIC / SWIFT	
Contact Person	
VAT Number	

Debtor

Name (Legal Form)	
Street	
Postal Code / State / Country	
Telephone Number / Fax / Email	

Claim

Customer Number	
Type of Claim	

Invoice (Credit Note) Date	Invoice (Credit Note) Number	Due Date	Amount/Currency
Total			

.....
Date

.....
Stamp / Signature