

TO: UCB BioPharma SRL
Contact : Pavla Lotova
Allée de la Recherche 60
1070 Brussels
Belgium
V.A.T: BE 0543.573.053

HONORARY FEE FORM

FROM:	NAME (LAST & FIRST): TITLE: FULL CONTACT ADDRESS: PHONE NUMBER: E-MAIL ADDRESS:	Patientforeningen HS Denmark c/o Bente Villumsen Holmevej 24, DK - 2860 Søborg Denmark
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SUBJECT OF REIMBURSEMENT: IMMUNOLOGY SUMMIT: PRAGUE: MARCH 2020
CANCELLED

	<u>Amount</u>	<u>Currency</u>
COMPENSATION FOR PREPARATION:	5000,-	DKK

TO BE REMITTED TO:

BY BANK WIRE

Full name of bank account holder: Patientforeningen HS Denmark
Account Number: 0712 – 0717 8409 33
Bank name: Nordea
Bank address: Grønjordsvej 10, 2300 København S
IBAN: DK1120000717840933

Date: 18. March 2020

Signature: 

For UCB

Vendor

If you are liable to the VAT, please don't use this form but send us an invoice to: UCB
BIOPHARMA SRL – Allée de la Recherche 60 – 1070 Brussels – Contact person: Pavla
LOTOVA – please mention our VAT Number: BE 0543.573.053