

Supplier Set-up Form

The following information is required in order to reimburse costs incurred by members of the Citizens' Assembly. The information provided will be used for this purpose only. **Please complete using BLOCK CAPITALS.**

Personal Details

Name: _____

Address: _____

Phone Number: _____

Email: _____

PPS No * _____

* Personal Public Service Number – Your PPS No is required in order to ensure all claims are reimbursed efficiently by our paying agent, the Department of the Taoiseach.

Bank Details

All payments are made by electronic fund transfer. In order to do so, we require your bank details. We suggest that you refer to your most recent bank statement to ensure bank details are correct and up to date. Any discrepancies may result in a delay in payment.

Bank Name: _____

Branch Name: _____

Account Name: _____

Account Number: _____

BIC details: _____

IBAN details : _____

Other reference numbers* _____

*Credit Union, Routing, BSB, Clearing etc where applicable

I consent to the Department of the Taoiseach using the above information for processing and payment of travel costs as a result of my participation in the Citizens' Assembly.

Signed: _____ Date _____

