

INVOICING INFORMATION FORM

Please fill in the form and upload it in Step 2.6 / Step 5.6.2 of the OBP On-boarding Portal.

Legal Entity Information: 1. Entity to which the invoice is billed	
*Legal Entity Name	
* Address	
Contact name	
*E-mail address	
*Number of MAH's <small>Please note that the number of MAHs you are asked to fill in has to be the total number of MAHs on behalf of which your OBP is going to upload data into the European Hub. Please use the drop-down menu.</small>	Please select MAH number
*VAT Number	
Your PO number (if required)	
Legal Entity Information: 2. Entity to which the services are provided <small>(Only complete this section if different to section above)</small>	
*Legal Entity Name	
Company Name/Department	
Address	
Contact name	
E-mail address	
Recipient of the invoice <small>(Only complete this section if the invoice is to be sent to an address other than above under section 1)</small>	
Company Name/Department	
Address	
Contact name	
E-mail address	

* Mandatory
 Comments :