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|  |  | **INFORMAÇÃO DA CONTA BANCÁRIA** |
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| Nome |        |  Nº IST–ID |        |

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| E-mail |        |

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| Serviço |        |  C. Custo |       | Ext.  |       |

Declaro que pretendo passar a receber os meus vencimentos por transferência bancária, segundo a entidade bancária abaixo discriminada:

|  |  |
| --- | --- |
| Banco |        |

|  |  |
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| Agência |        |

NIB – Número de Identificação Bancária

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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SWIFT / BIC

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Observações:

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| Data |        |    |    |  | Assinatura |  |

**ID DP 2** | V4 | 2022.05.09