

\_\_\_\_\_  
Company's name  
Registration No. \_\_\_\_\_  
Tax No. \_\_\_\_\_

To  
Komercijalna Banka AD Skopje  
  
International Division  
International Payment Operations and Foreign  
Currency Accounts Department  
  
Fax (02) 3 220 975  
E-mail: [Devizniplakjanja@kb.com.mk](mailto:Devizniplakjanja@kb.com.mk)

Subject: General authorization

We hereby authorize Komercijalna Banka AD Skopje to fill in and sign on our behalf and on our account the Form for foreign currency payment by payment order (Form 1450) based on previously submitted data to the Bank via fax or e-mail (being appropriate document for payment and accompanying payment instructions).

We undertake the responsibility for accuracy and completeness of the submitted data and documents.

Skopje \_\_\_\_\_

\_\_\_\_\_  
Signature (authorised  
signatory) and stamp