

**CONSOB**  
**Ufficio Programmazione Finanziaria e Bilancio**  
**Via G.B. Martini, n. 3**  
**00198 ROMA**  
**Fax: 068416703 - 068417707**  
**Email: [contributi@consob.it](mailto:contributi@consob.it)**

**Subject: Reimbursement request.**

\_\_\_\_\_  
(Firm name)

Legal address: \_\_\_\_\_

Tax number: \_\_\_\_\_

Ask for the reimbursement of € \_\_\_\_\_ paid as supervision fee to Consob:

over payment or double payment

\_\_\_\_\_  
(other reason)

by bank credit transfer to the following current account:

Bank name: \_\_\_\_\_

Branch: \_\_\_\_\_

Account name: \_\_\_\_\_

Account number: \_\_\_\_\_

SWIFT CODE: \_\_\_\_\_

IBAN CODE: \_\_\_\_\_

**Necessary documents to attache to reimbursement request:**

- copy of the receipt of the bank credit transfer of the amount double paid as supervision fee

Name, phone and fax number:

Name: \_\_\_\_\_

Contact: \_\_\_\_\_

(phone, fax, email)

**Date,** \_\_\_\_\_

**Signature**

\_\_\_\_\_