

By signing this mandate form, you authorise (A) KidsFoundationTest to send instructions to your bank to debit your account and (B) your bank to debit your account in accordance with the instructions from KidsFoundationTest.

As part of your rights, you are entitled to a refund from your bank under the terms and conditions of your agreement with your bank. A refund must be claimed within 8 weeks starting from the date on which your account was debited.

## Your information

Name **Willem Toemen**  
Address **Voorterweg 197**  
**5611TP Eindhoven**  
**Netherlands**  
Account number **IBAN NL24RABO0135064945**  
SWIFT **BIC RABONL2U**

## Creditor information

Creditor **KidsFoundationTest (59144548)**  
Creditor Identifier **NL13ZZZ1445480000**  
Creditor Address **Zwaanstraat 31 C**  
**5651CA Eindhoven**  
**Netherlands**

## Direct Debit info

Mandate reference **WHYELLOW176**  
Type of payment **Recurrent**  
Contract reference **General terms and conditions**

## Signature(s)

Hash of the document signed: 403917A6BF1C2AA7608DCDCC536B6B25DA113BDE

Place of signature:Sint-Oedenrode

Date:01/09/2021

Signed by HDB B.V. with E-Machtiging - reference code mock\_1630495095280 (initiated by Willem Toemen)

