** New Vendor Request Form**

**All fields are mandatory** unless stated otherwise, incomplete forms will be returned to Misys’ requester. Misys Requester must attach the completed form to the New Vendor Request that is raised in NetSuite.

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| **IMPORTANT - PLEASE NOTE:** |
| 1. **Approval is not automatic** |
| 2. **Vendors must provide written confirmation of their bank account and sort code on a company letter head**. |

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| **VENDOR DETAILS (to be completed by the Vendor)** | | | | | |
| Full Name of Vendor: Yossef Aviv C.P.A | | | | | |
| Brief description of goods / services provided: Accounting services | | | | | |
| Company Reg. No. | VAT Reg. No.  If applicable) | | | | |
| Service Tax Registration no. (if applicable) | PAN no. (applicable only for India). | | | | |
| Office Address: **9 Ben Zion Galis St.,Petach-Tikva 4927909 Israel** | | | | | |
| Payment Address (if different to Office Address): | | | | | |
| Purchase Ordering Address (if different to Office Address): | | | | | |
| Telephone:  +03-5403007 | | | Currency: **ILS** | | |
| E-mail Address for Orders: **Yossi@avivhashavim.com** | | | Remittance Email Address: **Yossi@avivhashavim.com** | | |
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| **BANK & CONTACT DETAILS (to be completed by the Vendor)**  **(*Must be supported by bank details on company letterhead emailed with form)*** | | | | | |
| Bank Name: **Mizrahi** | | Bank Address (if foreign bank): | | | |
| Account Holder’s Name:  Yossef Aviv C.P.A | | | | | |
| Bank Sort Code (if UK account): | | Bank Account Number: **66435** | | | |
| IBAN No **13-0204-2900-0000-0066-435IL** | | Swift Code/BIC:(if applicable) **MIZBILIT** | | | |
| Bank Clearing Code/ABA (optional): | | Currency: **ILS** | | | |
| By completing and returning this New Vendor Request Form you are agreeing to Misys standard payment terms of nett 60 days from date of invoice. | | | | | |
| Name: Yossef Aviv | | Title Certified Public Accountant | | | |
| **REQUISITIONER DECLARATION (To be completed by Misys’ requestor)** | | | | | |
| Have you checked the contracted Vendor list for a suitable existing Vendor? (check box to confirm) X | | | | | |
| Why is this purchase not possible from an existing Misys Vendor? **N/A** | | | | | |
| Function and role:  Finance, Senior Controller Professional | | | | Have bank details been attached on Vendors’ headed notepaper? Yes X No | |
| Form submitted by (First & Surname): **Larisa Dana** | | | | | Date: **14.03.2016** |