Name xxx, street, zip code, city, country

e-mail address

city, date

Novartis Pharma AG

Scientific Engagement Governance

Christian-C. Roth

Forum 1

Novartis Campus

CH-4056 Basel

Switzerland

VAT No. Novartis: CHE-116.268.023 MWST

VAT No. Consultant (if applicable)

AHV Number (if Consultant is a Swiss resident)

**Invoice No. xx**

Name, date and place of the event (e.g. Congress, Novartis meeting, etc)

Description of the services rendered (date, time, activity)

|  |  |  |
| --- | --- | --- |
| Honorarium | currency | amount |
| Expenses (original receipts attached) | currency | amount |
| Sub total | currency | amount |
| VAT rate xx % (if applicable)\* | currency | amount |
| **Grand total** | **currency** | **amount** |

Payment terms: 60 days upon receipt of invoice

|  |  |
| --- | --- |
| Bank name | Xxx |
| Bank address | Xxx |
| Account number | Xxx |
| IBAN number | Xxx |
| Full name on bank account | Xxx |
| SWIFT code | Xxx |
| ABA/Routing code | Xxx |
| Transit or BSB number | Xxx |

For Europe mandatory: IBAN & SWIFT Code

For US mandatory: ABA/Routing Code & SWIFT Code

For Australia mandatory: BSB Number & SWIFT Code

For Canada mandatory: Transit number & SWIFT Code