



Treasurer  
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**To:**  
**Hungarian Powerlifting Federation**

**Invoice date:** 08.01.2017  
**Payment date:** 31.01.2017

**INVOICE**

N° 49 - 1/17

| Number | Name                    | Individual price | Total    |
|--------|-------------------------|------------------|----------|
| 1      | Membership Fee IPF 2017 | € 400,00         | € 400,00 |
|        |                         |                  |          |
|        |                         |                  |          |
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|        |                         |                  |          |

**Amount: € 400,00**

The amount should be wired to the IPF account within the stipulated date or as soon as possible.

*Please note that payer is obliged to pay all charges associated with the transfer of the fees*

*Imported, by payments to the IPF account, the payer is obliged to specify the National Federation/or Company and listed invoice number*

**Account Name:** International Powerlifting Federation  
**IBAN:** LU57 0019 1300 4802 3000  
**Swift code (BIC):** BCEELULLXXX  
**Beneficiary Bank:** Caisse d'Epargne de l'Etat Luxembourg  
Place de Metz  
Luxembourg

**Account Name:** International Powerlifting Federation  
**PayPal**  
**PayPal account:** gparage@vo.lu