PERSONAL DATA SHEET FOR FOREIGN STAFF

FIRST COMMUNICATION	INFORMATION CHANGED ON
PERSONAL INFORMATION	
SURNAMENAME	
Place of birth (foreign town or country) date of birth	
tel e-mail	
Italian fiscal code	
Or, if resident abroad, taxpayer ID number (*)	
RESIDENCE	
Addresstown	postal code province
DOMICILE (for any communications, if other than residence)	and the second s
Addresstown Nationality	
Nationality	
*indicate the taxpayer identification number issued by the Tax Authority of the country of residence or, if unavailable, an identification number issued by an administrative authority of the country of residence.	
DOUBLE TAXATION	
I, the undersigned, declare that I avail myself of the Double Taxation Agreement with Italy (please attach documents proving eligibility to use the benefits of the Double Taxation Agreement, i.e. copy of Double Taxation Agreement and required documents) I, the undersigned, declare that I do not avail myself of the Double Taxation Agreement with Italy. DECLARATION OF SOCIAL SECURITY CONTRIBUTION STATUS	
	raken into consideration for calculating the amount of 5,000.00
euros.	
METHOD OF PAYMENT	
IBAN	
BIC/SWIFT code (mandatory for foreign bank accounts)	
Account holder	