



## Supplementary Report on Overdue Receivables

Please send via letter or fax  
to the following address:  
Coface Austria Kreditversicherung AG  
Stubenring 24  
1010 Vienna  
F. +43/1/515 54-50250

POLICY HOLDER

Policy number: \_\_\_\_\_

**CUSTOMER**

Complete legal company name and address as well as country (if foreign country):  
\_\_\_\_\_  
\_\_\_\_\_

CRS number: \_\_\_\_\_ Your reference number: \_\_\_\_\_

**SUPPLEMENTARY REPORT OF OVERDUE RECEIVABLES**

In accordance with the requirements of our policy, we are hereby notifying you that the above-mentioned customer has not paid the following due and payable receivable(s) within 60 days of the original due date.  
(Please mark disputed receivables with a "D" in column "Comments")

Outstanding Amounts				Payments / Credit Notes <sup>2</sup>		Comments
Invoice Number	Date of invoice	Original maturity date <sup>1</sup>	Currency / Amount	Currency / Amount	Date	
Amount of due receivables:						
Total receivables currently outstanding:						

<sup>1</sup> For sales made as "cash against documents", please enter "CAD" in column "Comments".  
<sup>2</sup> Please note any credit notes granted in column "Comments".

**STATUS OF COLLECTION PROCEDURES / ADDITIONAL DATA**

Reasons for overdue payment (mentioned by the customer):

- Tight financial situation
- Illiquidity
- Disputed receivables

Which actions were implemented to secure the claims and/or which actions will be implemented?

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Securities (e.g. retention of title, bond):

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**PLEASE NOTE that this report is not a substitute for the remaining reporting requirements stated in the insurance contract.**

\_\_\_\_\_  
City, Date

\_\_\_\_\_  
Authorised Signature