

**INVOICE DETAILS:**

Company name			
Address			
City		Post code	
Tax identification number		E-mail address(es) to which the PDF invoice should be sent	

**SENE'23 conference fees:****PARTICIPANTS to whom the fee applies**

Name	e-mail	Phone no.	Amount	IEEE no.*

\*) in the case of a reduced fee

**Sum:**

Please fill and send a completed form to: [anna.stolarczyk@p.lodz.pl](mailto:anna.stolarczyk@p.lodz.pl) no later than on the day the payment is made to the account **03 1240 3028 1111 0010 3741 8675**, **Politechnika Łódzka Instytut Automatyki 90-537 Łódź, Stefanowskiego 18, NIP: 727-002-18-95.**