



**Notification/change of bank account
personal assistant**

Social Services, Health Care and Rescue
Services Division

Clear form

Employee's last name	Employee's first name
Employee's date of birth	
Bank account number in IBAN format	
Date	Signature

Return the signed form to payroll either as an email attachment or by paper mail.

talpa.suoratyo@hel.fi

Talpa / Personal assistance
P.O. Box 231, 00099 CITY OF HELSINKI
Tel. +358 9 310 25239 (9.00–15.00)