American Airlines, Inc. International Vendor Profile Form (<u>Please Print</u>)

All vendors must complete these forms. Payments will not be made without the completed forms and requested documents. If applicable per country requirements, American Airlines will withhold taxes unless a withholding exemption certificate is provided.

ENDOR BASIC BUSINESS INFORMATION		
Legal Business Name:		
Parent Company (if applicable):		
Tax ID/Tax Registration Number:		
Company Registration Number (if applicable):		
For Billing Inquiries:		
Contact Name:		
Title:		
Tel:	Ext.	
Fax:	·	
Email:		
Business Address:	Remittance Ad	dress:
Address 1:	Address 1:	
Address 2:	Address 2:	
City:	City:	
State: Postal Code:	State:	Postal Code:
Country:	Country:	
Website:	Email:	
Please provide a copy of the following documents as app	licable:	
Business Existence Certificate (Colombia only)		voice with Company Logo
Company Business License or Registration Document	Bank Verification document (for electronic payments)	
Tax Registration (VAT or other Tax Registration)	Bank Account Certificate (where required)	
Primary Contact at American Airlines:		
Contact Name:		
Phone:	Email:	
Type of Good or Service Provided to American Airlines:		
COUNTRY SPECIFIC INFORMATION/DOCUMENTS IN AD	DITION TO THE AFC	REMENTIONED:
Check applicable Tax Payer Category (Andean Countries: B	Bolivia, Colombia, Ecu	ador, Peru and Venezuela only):
Buen Contribuyente		
GRACO	Régimen Simplificado	
Gran Contribuyente	Agente de Retención	

AMERICAN AIRLINES, INC. INTERNATIONAL VENDOR BANK DETAILS FORM (PLEASE PRINT)

BANK ACCOUNT HOLDER			
Business / Company / Payee Nan	ne:		
Street Address:			
City:			
Postal Code:		Country:	
Contact name & phone number:			
Contact Email Address for Payment Details and/or e-certificates:			

BENEFICIARY BANK DETAILS				
Name of the Bank Account Holder:				
Bank Account Holder Identity Card or Tax ID Number				
Beneficiary Bank Account Number:				
Beneficiary Bank Name:				
Branch Address:				
City:				
Postal Code:		Country:		
Branch Code:				
Bank Identifier Code (BIC or SWIFT):				
International Bank Account Number (IBAN / CCI) if applicable:				
Bank Routing Transit Number (ABA/ BRN/ RTN usually at bottom of check)				
Unique Banking Code (CBU)-Argentina only:				
Bank Account Currency:				
Bank Account Type:	Checkin			

INTERMEDIARY BANK DETAILS (if applicable)			
Intermediary Bank Name:			
Account Number:			
SWIFT/BIC/Routing Number:			

BANK CHECK (CHILE AND URUGUAY ONLY) The person below is authorized to pick up payment(s) for this supplier.		
Name:		
ID Number:		
Signature:		

I hereby certify that the information presented here is true and correct to the best of my knowledge.

Respondent's Printed Name and Title

Respondent's Signature

Date

Please return completed forms and documents to American Airlines Inc. by e-mail: registro.proveedores@aa.com. In the Subject line of the email, enter the Country, action (Vendor Create or Vendor Update), vendor name and the vendor number (if an update).



Please ensure you have completed this checklist and return it with the documents listed below directly to <u>registro.proveedores@aa.com</u>

- □ International Vendor Profile Form (Page 1) completed by an authorized supplier employee.
- □ International Vendor Bank Details Form (Page 2) completed and signed by an authorized supplier employee.
- Bank verification that includes the account holder's name, account number, account type, currency and bank name. It can either be a copy of a voided check, bank statement, letter from the bank, bank account certificate, or a bank card. (Italy is excluded.)
- □ Include support for name change, address change and/or other updates.

To protect your data, all completed forms and required documentation should be sent directly to <u>registro.proveedores@aa.com</u>. We recommend that you not copy other American Airlines email addresses in order to maintain confidentiality of sensitive information. If you wish to password protect the file, please send a password in separate email so we will be able to open it.

I hereby certify that the information provided here is true and correct to the best of my knowledge.

Supplier's Printed Name & Title

Supplier's Signature

Date

Company Name and/or Stamp