



HORN OF AFRICA

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ALIGHT - SOMALILAND COMPANY IDENTIFICATION

Name of company:	
Representative name:	
Representative function:	

Physical address:	Region:	
	District:	
	Town:	
Email address:		
Telephone:	Land line:	
	Mobile:	
Bank Details:	Bank Name:	
	Bank Address:	
	Account Name:	
	Account N°:	

Place:

Date: / /

Contractor's Representative:

.....

Signature:

Stamp: