

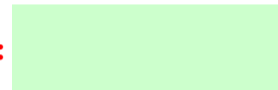


EUROPEAN COMMISSION
DIRECTORATE-GENERAL FOR MARITIME AFFAIRS AND FISHERIES
Directorate C: Fisheries Policy Atlantic, North Sea, Baltic and Outermost Regions
Unit C: Scientific Advice and Data Collection

European Maritime and Fisheries Fund (EMFF)

Model Financial Statement

Please enter information in cells marked in green:

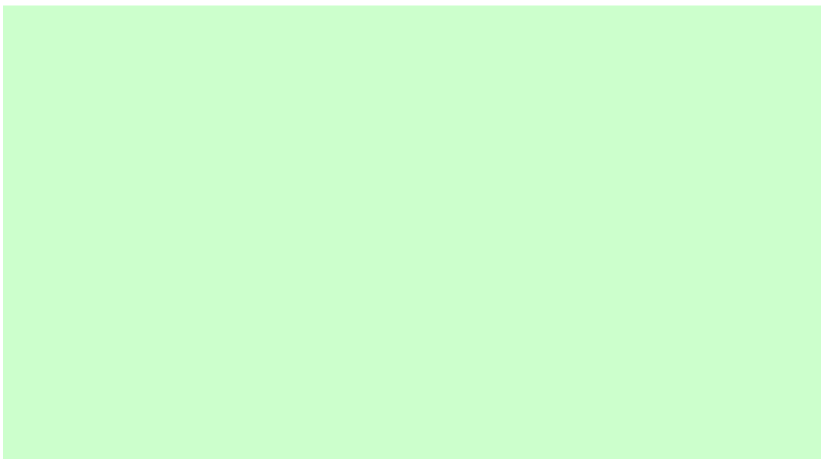


Project Number:

Project Full Name:

Coordinator:

Reporting Period*:



*Please carefully fill in the reporting dates according to the Grant Agreement.

For good follow-up of your statement, please always save this file with project number and acronym as follows: "Financial_statement_project_number_acronym".

OVERVIEW OF COSTS INCURRED FOR PERIOD N°

TO

Number of Beneficiary or Affiliated entity	Name of Beneficiary or Affiliated entity	Direct eligible cost					Subtotal of direct eligible costs	Indirect eligible costs	Total eligible costs	Requested Funding from the EU
		Staff Costs	Sub-contracting	Travel costs and Subsistence	Equipment	Other Specific Costs				
1	0	0	0	0	0	0	0	0	0	0
2	0	0	0	0	0	0	0	0	0	0
3	0	0	0	0	0	0	0	0	0	0
4	0	0	0	0	0	0	0	0	0	0
5	0	0	0	0	0	0	0	0	0	0
6	0	0	0	0	0	0	0	0	0	0
7	0	0	0	0	0	0	0	0	0	0
8	0	0	0	0	0	0	0	0	0	0
9	0	0	0	0	0	0	0	0	0	0
10	0	0	0	0	0	0	0	0	0	0
11	0	0	0	0	0	0	0	0	0	0
12	0	0	0	0	0	0	0	0	0	0
13	0	0	0	0	0	0	0	0	0	0
14	0	0	0	0	0	0	0	0	0	0
15	0	0	0	0	0	0	0	0	0	0
TOTAL		0	0	0	0	0	0	0	0	0

Reporting period N°: to
 For the period from to
 Name of the Beneficiary/Affiliated entity:
 My organisation can not claim the VAT back :

STAFF COSTS (1)

Copies of timesheets and justification for labour rate and overhead rate calculations for the three highest cost items must be attached to the Financial Statement. Copies of other timesheets and justification for labour rate and overhead rate calculations may be requested by the Commission at anytime.
 The cost of staff assigned to the action, comprising actual salaries plus social security charges and other statutory costs included in the remuneration, provided that this does not exceed the average rates corresponding to the beneficiary's usual policy on remuneration. Commission will not accept any specific bonuses paid out only for the participation in EU projects.

Line N°	Staff /In-house consultants	Name	Category name (e.g. senior expert, engineer, etc.)	Number of person-hours	Hourly rate	Staff costs amount
				A	B	AxB
1						0,00
2						0,00
3						0,00
4						0,00
5						0,00
6						0,00
7						0,00
8						0,00
9						0,00
10						0,00
11						0,00
12						0,00
13						0,00
14						0,00
15						0,00
16						0,00
17						0,00
18						0,00
19						0,00
20						0,00
Subtotal				0,00		0,00

SUBCONTRACTING (2)

Copies of invoices for the three highest cost items must be attached to the Financial Statement. Copies of the other invoices may be requested by the Commission at anytime.
 If the beneficiaries have to conclude contracts in order to carry out the action and they constitute costs of the action under an item of eligible direct costs in the estimated budget, they shall seek competitive offers from potential contractors and award the contract to the bid offering best value for money; in doing so, they shall observe the principle of transparency and equal treatment of potential contractors and shall take care to avoid any conflict of interests.

Line N°	Name of Subcontractor	Date of the invoice	Invoice number	Description of the work undertaken	Amount
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					
Subtotal					0,00

TRAVEL AND SUBSISTENCE (3)

Copies of invoices for the three highest cost items must be attached to the Financial Statement. Copies of other invoices may be requested by the Commission at anytime. Travel and subsistence allowances for staff taking part in the action, provided that they are in line with the beneficiary's usual practices on travel costs or do not exceed the scales approved annually by the Commission.

Line N°	Name	Destination (city, country)	Date (dd/mm/yy)	Duration (days)	Purpose	Amount
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						
17						
18						
19						
20						
Subtotal						0,00

EQUIPMENT AND INFRASTRUCTURE (4)

Copies of invoices for the three highest cost items must be attached to the Financial Statement. Copies of the other invoices may be requested by the Commission at anytime. The purchase cost of equipment (new or second-hand), provided that it is depreciated in accordance with the tax and accounting rules applicable to the beneficiary and generally accepted for items of the same kind. Only the portion of the equipment's depreciation corresponding to the correct reporting period and the rate of actual use for the purposes of the action may be taken into account by the Commission, except where the nature and/or the context of its use justifies different treatment by the Commission.

Line N°	Description	Date of the invoice AND invoice number	Quantity	Unit cost	Period in months used for the project during the correct reporting period	Depreciation in months	% Allocation to project	Amount
			A	B	C	D	E	AxBx(C/D)xE
1								#DIV/0!
2								#DIV/0!
3								#DIV/0!
4								#DIV/0!
5								#DIV/0!
6								#DIV/0!
7								#DIV/0!
8								#DIV/0!
9								#DIV/0!
10								#DIV/0!
11								#DIV/0!
12								#DIV/0!
13								#DIV/0!
14								#DIV/0!
15								#DIV/0!
16								#DIV/0!
17								#DIV/0!
18								#DIV/0!
19								#DIV/0!
20								#DIV/0!
Subtotal								0,00

OTHER SPECIFIC COSTS (5)

Copies of invoices for the three highest cost items must be attached to the Financial Statement. Copies of the other invoices may be requested by the Commission at anytime.

Line N°	Name of supplier	Date of the invoice	Invoice number	Description	Amount
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					
Subtotal					0,00

REVENUES OTHER THAN EMFF PROGRAMME AND OWN FUNDING (6)

To be completed only at the Final Statement. Revenues from the action (3rd parties, sales or other contributions), **excluding** financial contribution of the EMFF programme and own funding.

Line N°	Sources of revenue (3rd parties, sales or other contributions)	Date of funding (dd/mm/yy)	Amount
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			
19			
20			
Subtotal			0,00
Total direct eligible costs			0,00
Total eligible costs			0,00

Statement by the beneficiary

I certify that:

- the above costs correspond to the resources employed for the work under the agreement and that those resources were necessary for the work,
- the costs were incurred and fall within the definition of eligible costs,
- where necessary, authorisations have been obtained from the Commission, and
- all the documents supporting the allowable costs reported above, including the time records are available for the purposes of audit by the Commission and its authorised representatives or the Court of Auditors and reflect the costs actually incurred.

Date:

Name of the Legal Representative of the Coordinator or his/her Authorised Representative

Signature of the Name of the Legal Representative of the Coordinator or his/her Authorised Representative

Reporting period N°: to

For the period from to

Name of the Beneficiary/Affiliated entity:

My organisation can not claim the VAT back :

STAFF COSTS (1)

Copies of timesheets and justification for labour rate and overhead rate calculations for the three highest cost items must be attached to the Financial Statement. Copies of other timesheets and justification for labour rate and overhead rate calculations may be requested by the Commission at anytime.
 The cost of staff assigned to the action, comprising actual salaries plus social security charges and other statutory costs included in the remuneration, provided that this does not exceed the average rates corresponding to the beneficiary's usual policy on remuneration. Commission will not accept any specific bonuses paid out only for the participation in EU projects.

Line N°	Staff/In-house consultants	Name	Category name (e.g. senior expert, engineer, etc.)	Number of person-hours	Hourly rate	Staff costs amount
				A	B	AxB
1						0,00
2						0,00
3						0,00
4						0,00
5						0,00
6						0,00
7						0,00
8						0,00
9						0,00
10						0,00
11						0,00
12						0,00
13						0,00
14						0,00
15						0,00
16						0,00
17						0,00
18						0,00
19						0,00
20						0,00
Subtotal				0,00		0,00

SUBCONTRACTING (2)

Copies of invoices for the three highest cost items must be attached to the Financial Statement. Copies of the other invoices may be requested by the Commission at anytime.
 If the beneficiaries have to conclude contracts in order to carry out the action and they constitute costs of the action under an item of eligible direct costs in the estimated budget, they shall seek competitive offers from potential contractors and award the contract to the bid offering best value for money; in doing so, they shall observe the principle of transparency and equal treatment of potential contractors and shall take care to avoid any conflict of interests.

Line N°	Name of Subcontractor	Date of the invoice	Invoice number	Description of the work undertaken	Amount
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					
Subtotal					0,00

TRAVEL AND SUBSISTENCE (3)

Copies of invoices for the three highest cost items must be attached to the Financial Statement. Copies of other invoices may be requested by the Commission at anytime. Travel and subsistence allowances for staff taking part in the action, provided that they are in line with the beneficiary's usual practices on travel costs or do not exceed the scales approved annually by the Commission.

Line N°	Name	Destination (city, country)	Date (dd/mm/yy)	Duration (days)	Purpose	Amount
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						
17						
18						
19						
20						
Subtotal						0,00

EQUIPMENT AND INFRASTRUCTURE (4)

Copies of invoices for the three highest cost items must be attached to the Financial Statement. Copies of the other invoices may be requested by the Commission at anytime. The purchase cost of equipment (new or second-hand), provided that it is depreciated in accordance with the tax and accounting rules applicable to the beneficiary and generally accepted for items of the same kind. Only the portion of the equipment's depreciation corresponding to the correct reporting period and the rate of actual use for the purposes of the action may be taken into account by the Commission, except where the nature and/or the context of its use justifies different treatment by the Commission.

Line N°	Description	Date of the invoice AND invoice number	Quantity	Unit cost	Period in months used for the project during the correct reporting period	Depreciation in months	% Allocation to project	Amount
			A	B	C	D	E	AxBx(C/D)xE
1								#DIV/0!
2								#DIV/0!
3								#DIV/0!
4								#DIV/0!
5								#DIV/0!
6								#DIV/0!
7								#DIV/0!
8								#DIV/0!
9								#DIV/0!
10								#DIV/0!
11								#DIV/0!
12								#DIV/0!
13								#DIV/0!
14								#DIV/0!
15								#DIV/0!
16								#DIV/0!
17								#DIV/0!
18								#DIV/0!
19								#DIV/0!
20								#DIV/0!
Subtotal								0,00

OTHER SPECIFIC COSTS (5)

Copies of invoices for the three highest cost items must be attached to the Financial Statement. Copies of the other invoices may be requested by the Commission at anytime.

Line N°	Name of supplier	Date of the invoice	Invoice number	Description	Amount
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					
Subtotal					0,00

REVENUES OTHER THAN EMFF PROGRAMME AND OWN FUNDING (6)

To be completed only at the Final Statement. Revenues from the action (3rd parties, sales or other contributions), **excluding** financial contribution of the EMFF programme and own funding.

Line N°	Sources of revenue (3rd parties, sales or other contributions)	Date of funding (dd/mm/yy)	Amount
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			
19			
20			
Subtotal			0,00

Statement by the beneficiary

I certify that:
 - the above costs correspond to the resources employed for the work under the agreement and that those resources were necessary for the work,
 - the costs were incurred and fall within the definition of eligible costs,
 - where necessary, authorisations have been obtained from the Commission, and
 - all the documents supporting the allowable costs reported above, including the time records are available for the purposes of audit by the Commission and its authorised representatives or the Court of Auditors and reflect the costs actually incurred.

Date:

Name of the Legal Representative or his/her Authorised Representative

Signature of the Legal Representative or his/her Authorised Representative

Total direct eligible costs
 Total eligible costs

Reporting period N°: to

For the period from to

Name of the Beneficiary/Affiliated entity:

My organisation can not claim the VAT back :

STAFF COSTS (1)

Copies of timesheets and justification for labour rate and overhead rate calculations for the three highest cost items must be attached to the Financial Statement. Copies of other timesheets and justification for labour rate and overhead rate calculations may be requested by the Commission at anytime.
 The cost of staff assigned to the action, comprising actual salaries plus social security charges and other statutory costs included in the remuneration, provided that this does not exceed the average rates corresponding to the beneficiary's usual policy on remuneration. Commission will not accept any specific bonuses paid out only for the participation in EU projects.

Line N°	Staff/In-house consultants	Name	Category name (e.g. senior expert, engineer, etc.)	Number of person-hours	Hourly rate	Staff costs amount
				A	B	AxB
1						0,00
2						0,00
3						0,00
4						0,00
5						0,00
6						0,00
7						0,00
8						0,00
9						0,00
10						0,00
11						0,00
12						0,00
13						0,00
14						0,00
15						0,00
16						0,00
17						0,00
18						0,00
19						0,00
20						0,00
Subtotal				0,00		0,00

SUBCONTRACTING (2)

Copies of invoices for the three highest cost items must be attached to the Financial Statement. Copies of the other invoices may be requested by the Commission at anytime.
 If the beneficiaries have to conclude contracts in order to carry out the action and they constitute costs of the action under an item of eligible direct costs in the estimated budget, they shall seek competitive offers from potential contractors and award the contract to the bid offering best value for money; in doing so, they shall observe the principle of transparency and equal treatment of potential contractors and shall take care to avoid any conflict of interests.

Line N°	Name of Subcontractor	Date of the invoice	Invoice number	Description of the work undertaken	Amount
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					
Subtotal					0,00

TRAVEL AND SUBSISTENCE (3)

Copies of invoices for the three highest cost items must be attached to the Financial Statement. Copies of other invoices may be requested by the Commission at anytime. Travel and subsistence allowances for staff taking part in the action, provided that they are in line with the beneficiary's usual practices on travel costs or do not exceed the scales approved annually by the Commission.

Line N°	Name	Destination (city, country)	Date (dd/mm/yy)	Duration (days)	Purpose	Amount
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						
17						
18						
19						
20						
Subtotal						0,00

EQUIPMENT AND INFRASTRUCTURE (4)

Copies of invoices for the three highest cost items must be attached to the Financial Statement. Copies of the other invoices may be requested by the Commission at anytime. The purchase cost of equipment (new or second-hand), provided that it is depreciated in accordance with the tax and accounting rules applicable to the beneficiary and generally accepted for items of the same kind. Only the portion of the equipment's depreciation corresponding to the correct reporting period and the rate of actual use for the purposes of the action may be taken into account by the Commission, except where the nature and/or the context of its use justifies different treatment by the Commission.

Line N°	Description	Date of the invoice AND invoice number	Quantity	Unit cost	Period in months used for the project during the correct reporting period	Depreciation in months	% Allocation to project	Amount
			A	B	C	D	E	AxBx(C/D)xE
1								#DIV/0!
2								#DIV/0!
3								#DIV/0!
4								#DIV/0!
5								#DIV/0!
6								#DIV/0!
7								#DIV/0!
8								#DIV/0!
9								#DIV/0!
10								#DIV/0!
11								#DIV/0!
12								#DIV/0!
13								#DIV/0!
14								#DIV/0!
15								#DIV/0!
16								#DIV/0!
17								#DIV/0!
18								#DIV/0!
19								#DIV/0!
20								#DIV/0!
Subtotal								0,00

OTHER SPECIFIC COSTS (5)

Copies of invoices for the three highest cost items must be attached to the Financial Statement. Copies of the other invoices may be requested by the Commission at anytime.

Line N°	Name of supplier	Date of the invoice	Invoice number	Description	Amount
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					
Subtotal					0,00

REVENUES OTHER THAN EMFF PROGRAMME AND OWN FUNDING (6)

To be completed only at the Final Statement. Revenues from the action (3rd parties, sales or other contributions), **excluding** financial contribution of the EMFF programme and own funding.

Line N°	Sources of revenue (3rd parties, sales or other contributions)	Date of funding (dd/mm/yy)	Amount
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			
19			
20			
Subtotal			0,00

Statement by the beneficiary

I certify that:

- the above costs correspond to the resources employed for the work under the agreement and that those resources were necessary for the work,
- the costs were incurred and fall within the definition of eligible costs,
- where necessary, authorisations have been obtained from the Commission, and
- all the documents supporting the allowable costs reported above, including the time records are available for the purposes of audit by the Commission and its authorised representatives or the Court of Auditors and reflect the costs actually incurred.

Date:

Name of the Legal Representative or his/her Authorised Representative

Signature of the Legal Representative or his/her Authorised Representative

Total direct eligible costs
Total eligible costs

Reporting period N°: to

For the period from to

Name of the Beneficiary/Affiliated entity:

My organisation can not claim the VAT back :

STAFF COSTS (1)

Copies of timesheets and justification for labour rate and overhead rate calculations for the three highest cost items must be attached to the Financial Statement. Copies of other timesheets and justification for labour rate and overhead rate calculations may be requested by the Commission at anytime.
 The cost of staff assigned to the action, comprising actual salaries plus social security charges and other statutory costs included in the remuneration, provided that this does not exceed the average rates corresponding to the beneficiary's usual policy on remuneration. Commission will not accept any specific bonuses paid out only for the participation in EU projects.

Line N°	Staff	Name	Category name (e.g. senior expert, engineer, etc.)	Number of man-hours	Hourly rate	Staff costs amount
				A	B	AxB
1						0,00
2						0,00
3						0,00
4						0,00
5						0,00
6						0,00
7						0,00
8						0,00
9						0,00
10						0,00
11						0,00
12						0,00
13						0,00
14						0,00
15						0,00
16						0,00
17						0,00
18						0,00
19						0,00
20						0,00
Subtotal				0,00		0,00

SUBCONTRACTING (2)

Copies of invoices for the three highest cost items must be attached to the Financial Statement. Copies of the other invoices may be requested by the Commission at anytime.
 If the beneficiaries have to conclude contracts in order to carry out the action and they constitute costs of the action under an item of eligible direct costs in the estimated budget, they shall seek competitive offers from potential contractors and award the contract to the bid offering best value for money; in doing so, they shall observe the principle of transparency and equal treatment of potential contractors and shall take care to avoid any conflict of interests.

Line N°	Name of Subcontractor	Date of the invoice	Invoice number	Description of the work undertaken	Amount
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					
Subtotal					0,00

TRAVEL AND SUBSISTENCE (3)

Copies of invoices for the three highest cost items must be attached to the Financial Statement. Copies of other invoices may be requested by the Commission at anytime. Travel and subsistence allowances for staff taking part in the action, provided that they are in line with the beneficiary's usual practices on travel costs or do not exceed the scales approved annually by the Commission.

Line N°	Name	Destination (city, country)	Date (dd/mm/yy)	Duration (days)	Purpose	Amount
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						
17						
18						
19						
20						
Subtotal						0,00

EQUIPMENT AND INFRASTRUCTURE (4)

Copies of invoices for the three highest cost items must be attached to the Financial Statement. Copies of the other invoices may be requested by the Commission at anytime. The purchase cost of equipment (new or second-hand), provided that it is depreciated in accordance with the tax and accounting rules applicable to the beneficiary and generally accepted for items of the same kind. Only the portion of the equipment's depreciation corresponding to the correct reporting period and the rate of actual use for the purposes of the action may be taken into account by the Commission, except where the nature and/or the context of its use justifies different treatment by the Commission.

Line N°	Description	Date of the invoice AND invoice number	Quantity	Unit cost	Period in months used for the project during the correct reporting period	Depreciation in months	% Allocation to project	Amount
			A	B	C	D	E	AxBx(C/D)xE
1								#DIV/0!
2								#DIV/0!
3								#DIV/0!
4								#DIV/0!
5								#DIV/0!
6								#DIV/0!
7								#DIV/0!
8								#DIV/0!
9								#DIV/0!
10								#DIV/0!
11								#DIV/0!
12								#DIV/0!
13								#DIV/0!
14								#DIV/0!
15								#DIV/0!
16								#DIV/0!
17								#DIV/0!
18								#DIV/0!
19								#DIV/0!
20								#DIV/0!
Subtotal								0,00

OTHER SPECIFIC COSTS (5)

Copies of invoices for the three highest cost items must be attached to the Financial Statement. Copies of the other invoices may be requested by the Commission at anytime.

Line N°	Name of supplier	Date of the invoice	Invoice number	Description	Amount
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					
Subtotal					0,00

REVENUES OTHER THAN EMFF PROGRAMME AND OWN FUNDING (6)

To be completed only at the Final Statement. Revenues from the action (3rd parties, sales or other contributions), **excluding** financial contribution of the EMFF programme and own funding.

Line N°	Sources of revenue (3rd parties, sales or other contributions)	Date of funding (dd/mm/yy)	Amount
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			
19			
20			
Subtotal			0,00

Statement by the beneficiary

I certify that:

- the above costs correspond to the resources employed for the work under the agreement and that those resources were necessary for the work,
- the costs were incurred and fall within the definition of eligible costs,
- where necessary, authorisations have been obtained from the Commission, and
- all the documents supporting the allowable costs reported above, including the time records are available for the purposes of audit by the Commission and its authorised representatives or the Court of Auditors and reflect the costs actually incurred.

Date:

Name of the Legal Representative or his/her Authorised Representative

Signature of the Legal Representative or his/her Authorised Representative

Total direct eligible costs
Total eligible costs

Reporting period N°: to

For the period from to

Name of the Beneficiary/Affiliated entity:

My organisation can not claim the VAT back :

STAFF COSTS (1)

Copies of timesheets and justification for labour rate and overhead rate calculations for the three highest cost items must be attached to the Financial Statement. Copies of other timesheets and justification for labour rate and overhead rate calculations may be requested by the Commission at anytime.
 The cost of staff assigned to the action, comprising actual salaries plus social security charges and other statutory costs included in the remuneration, provided that this does not exceed the average rates corresponding to the beneficiary's usual policy on remuneration. Commission will not accept any specific bonuses paid out only for the participation in EU projects.

Line N°	Staff/In-house consultants	Name	Category name (e.g. senior expert, engineer, etc.)	Number of person-hours	Hourly rate	Staff costs amount
				A	B	AxB
1						0,00
2						0,00
3						0,00
4						0,00
5						0,00
6						0,00
7						0,00
8						0,00
9						0,00
10						0,00
11						0,00
12						0,00
13						0,00
14						0,00
15						0,00
16						0,00
17						0,00
18						0,00
19						0,00
20						0,00
Subtotal				0,00		0,00

SUBCONTRACTING (2)

Copies of invoices for the three highest cost items must be attached to the Financial Statement. Copies of the other invoices may be requested by the Commission at anytime.
 If the beneficiaries have to conclude contracts in order to carry out the action and they constitute costs of the action under an item of eligible direct costs in the estimated budget, they shall seek competitive offers from potential contractors and award the contract to the bid offering best value for money; in doing so, they shall observe the principle of transparency and equal treatment of potential contractors and shall take care to avoid any conflict of interests.

Line N°	Name of Subcontractor	Date of the invoice	Invoice number	Description of the work undertaken	Amount
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					
Subtotal					0,00

TRAVEL AND SUBSISTENCE (3)

Copies of invoices for the three highest cost items must be attached to the Financial Statement. Copies of other invoices may be requested by the Commission at anytime. Travel and subsistence allowances for staff taking part in the action, provided that they are in line with the beneficiary's usual practices on travel costs or do not exceed the scales approved annually by the Commission.

Line N°	Name	Destination (city, country)	Date (dd/mm/yy)	Duration (days)	Purpose	Amount
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						
17						
18						
19						
20						
Subtotal						0,00

EQUIPMENT AND INFRASTRUCTURE (4)

Copies of invoices for the three highest cost items must be attached to the Financial Statement. Copies of the other invoices may be requested by the Commission at anytime. The purchase cost of equipment (new or second-hand), provided that it is depreciated in accordance with the tax and accounting rules applicable to the beneficiary and generally accepted for items of the same kind. Only the portion of the equipment's depreciation corresponding to the correct reporting period and the rate of actual use for the purposes of the action may be taken into account by the Commission, except where the nature and/or the context of its use justifies different treatment by the Commission.

Line N°	Description	Date of the invoice AND invoice number	Quantity	Unit cost	Period in months used for the project during the correct reporting period	Depreciation in months	% Allocation to project	Amount
			A	B	C	D	E	AxBx(C/D)xE
1								#DIV/0!
2								#DIV/0!
3								#DIV/0!
4								#DIV/0!
5								#DIV/0!
6								#DIV/0!
7								#DIV/0!
8								#DIV/0!
9								#DIV/0!
10								#DIV/0!
11								#DIV/0!
12								#DIV/0!
13								#DIV/0!
14								#DIV/0!
15								#DIV/0!
16								#DIV/0!
17								#DIV/0!
18								#DIV/0!
19								#DIV/0!
20								#DIV/0!
Subtotal								0,00

OTHER SPECIFIC COSTS (5)

Copies of invoices for the three highest cost items must be attached to the Financial Statement. Copies of the other invoices may be requested by the Commission at anytime.

Line N°	Name of supplier	Date of the invoice	Invoice number	Description	Amount
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					
Subtotal					0,00

REVENUES OTHER THAN EMFF FUNDING PROGRAMME AND OWN FUNDING (6)

To be completed only at the Final Statement. Revenues from the action (3rd parties, sales or other contributions), **excluding** financial contribution of the EMFF programme and own funding.

Line N°	Sources of revenue (3rd parties, sales or other contributions)	Date of funding (dd/mm/yy)	Amount
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			
19			
20			
Subtotal			0,00

Statement by the beneficiary

I certify that

- the above costs correspond to the resources employed for the work under the agreement and that those resources were necessary for the work,
- the costs were incurred and fall within the definition of eligible costs,
- where necessary, authorisations have been obtained from the Commission, and
- all the documents supporting the allowable costs reported above, including the time records are available for the purposes of audit by the Commission and its authorised representatives or the Court of Auditors and reflect the costs actually incurred.

Date:

Name of the Legal Representative or his/her Authorised Representative

Signature of the Legal Representative or his/her Authorised Representative

Total direct eligible costs
Total eligible costs

Reporting period N°: to

For the period from to

Name of the Beneficiary/Affiliated entity:

My organisation can not claim the VAT back :

STAFF COSTS (1)

Copies of timesheets and justification for labour rate and overhead rate calculations for the three highest cost items must be attached to the Financial Statement. Copies of other timesheets and justification for labour rate and overhead rate calculations may be requested by the Commission at anytime.
 The cost of staff assigned to the action, comprising actual salaries plus social security charges and other statutory costs included in the remuneration, provided that this does not exceed the average rates corresponding to the beneficiary's usual policy on remuneration. Commission will not accept any specific bonuses paid out only for the participation in EU projects.

Line N°	Staff/In-house consultants	Name	Category name (e.g. senior expert, engineer, etc.)	Number of person-hours	Hourly rate	Staff costs amount
				A	B	AxB
1						0,00
2						0,00
3						0,00
4						0,00
5						0,00
6						0,00
7						0,00
8						0,00
9						0,00
10						0,00
11						0,00
12						0,00
13						0,00
14						0,00
15						0,00
16						0,00
17						0,00
18						0,00
19						0,00
20						0,00
Subtotal				0,00		0,00

SUBCONTRACTING (2)

Copies of invoices for the three highest cost items must be attached to the Financial Statement. Copies of the other invoices may be requested by the Commission at anytime.
 If the beneficiaries have to conclude contracts in order to carry out the action and they constitute costs of the action under an item of eligible direct costs in the estimated budget, they shall seek competitive offers from potential contractors and award the contract to the bid offering best value for money; in doing so, they shall observe the principle of transparency and equal treatment of potential contractors and shall take care to avoid any conflict of interests.

Line N°	Name of Subcontractor	Date of the invoice	Invoice number	Description of the work undertaken	Amount
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					
Subtotal					0,00

TRAVEL AND SUBSISTENCE (3)

Copies of invoices for the three highest cost items must be attached to the Financial Statement. Copies of other invoices may be requested by the Commission at anytime.
 Travel and subsistence allowances for staff taking part in the action, provided that they are in line with the beneficiary's usual practices on travel costs or do not exceed the scales approved annually by the Commission.

Line N°	Name	Destination (city, country)	Date (dd/mm/yy)	Duration (days)	Purpose	Amount
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						
17						
18						
19						
20						
Subtotal						0,00

EQUIPMENT AND INFRASTRUCTURE (4)

Copies of invoices for the three highest cost items must be attached to the Financial Statement. Copies of the other invoices may be requested by the Commission at anytime.
 The purchase cost of equipment (new or second-hand), provided that it is depreciated in accordance with the tax and accounting rules applicable to the beneficiary and generally accepted for items of the same kind. Only the portion of the equipment's depreciation corresponding to the correct reporting period and the rate of actual use for the purposes of the action may be taken into account by the Commission, except where the nature and/or the context of its use justifies different treatment by the Commission.

Line N°	Description	Date of the invoice AND invoice number	Quantity	Unit cost	Period in months used for the project during the correct reporting period	Depreciation in months	% Allocation to project	Amount
			A	B	C	D	E	AxBx(C/D)xE
1								#DIV/0!
2								#DIV/0!
3								#DIV/0!
4								#DIV/0!
5								#DIV/0!
6								#DIV/0!
7								#DIV/0!
8								#DIV/0!
9								#DIV/0!
10								#DIV/0!
11								#DIV/0!
12								#DIV/0!
13								#DIV/0!
14								#DIV/0!
15								#DIV/0!
16								#DIV/0!
17								#DIV/0!
18								#DIV/0!
19								#DIV/0!
20								#DIV/0!
Subtotal								0,00

OTHER SPECIFIC COSTS (5)

Copies of invoices for the three highest cost items must be attached to the Financial Statement. Copies of the other invoices may be requested by the Commission at anytime.

Line N°	Name of supplier	Date of the invoice	Invoice number	Description	Amount
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					
Subtotal					0,00

REVENUES OTHER THAN EMFF PROGRAMME AND OWN FUNDING (6)

To be completed only at the Final Statement. Revenues from the action (3rd parties, sales or other contributions), **excluding** financial contribution of the EMFF programme and own funding.

Line N°	Sources of revenue (3rd parties, sales or other contributions)	Date of funding (dd/mm/yy)	Amount
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			
19			
20			
Subtotal			0,00

Statement by the beneficiary

I certify that:

- the above costs correspond to the resources employed for the work under the agreement and that those resources were necessary for the work,
- the costs were incurred and fall within the definition of eligible costs,
- where necessary, authorisations have been obtained from the Commission, and
- all the documents supporting the allowable costs reported above, including the time records are available for the purposes of audit by the Commission and its authorised representatives or the Court of Auditors and reflect the costs actually incurred.

Date:

Name of the Legal Representative or his/her Authorised Representative

Signature of the Legal Representative or his/her Authorised Representative

Total direct eligible costs

Total eligible costs

Reporting period N°: to

For the period from to

Name of the Beneficiary/Affiliated entity:

My organisation can not claim the VAT back :

STAFF COSTS (1)

Copies of timesheets and justification for labour rate and overhead rate calculations for the three highest cost items must be attached to the Financial Statement. Copies of other timesheets and justification for labour rate and overhead rate calculations may be requested by the Commission at anytime.
The cost of staff assigned to the action, comprising actual salaries plus social security charges and other statutory costs included in the remuneration, provided that this does not exceed the average rates corresponding to the beneficiary's usual policy on remuneration. Commission will not accept any specific bonuses paid out only for the participation in EU projects.

Line N°	Staff/in-house consultants	Name	Category name (e.g. senior expert, engineer, etc.)	Number of person - hours	Hourly rate	Staff costs amount
				A	B	AxB
1						0,00
2						0,00
3						0,00
4						0,00
5						0,00
6						0,00
7						0,00
8						0,00
9						0,00
10						0,00
11						0,00
12						0,00
13						0,00
14						0,00
15						0,00
16						0,00
17						0,00
18						0,00
19						0,00
20						0,00
Subtotal				0,00		0,00

SUBCONTRACTING (2)

Copies of invoices for the three highest cost items must be attached to the Financial Statement. Copies of the other invoices may be requested by the Commission at anytime.
If the beneficiaries have to conclude contracts in order to carry out the action and they constitute costs of the action under an item of eligible direct costs in the estimated budget, they shall seek competitive offers from potential contractors and award the contract to the bid offering best value for money; in doing so, they shall observe the principle of transparency and equal treatment of potential contractors and shall take care to avoid any conflict of interests.

Line N°	Name of Subcontractor	Date of the invoice	Invoice number	Description of the work undertaken	Amount
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					
Subtotal					0,00

TRAVEL AND SUBSISTENCE (3)

Copies of invoices for the three highest cost items must be attached to the Financial Statement. Copies of other invoices may be requested by the Commission at anytime. Travel and subsistence allowances for staff taking part in the action, provided that they are in line with the beneficiary's usual practices on travel costs or do not exceed the scales approved annually by the Commission.

Line N°	Name	Destination (city, country)	Date (dd/mm/yy)	Duration (days)	Purpose	Amount
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						
17						
18						
19						
20						
Subtotal						0,00

EQUIPMENT AND INFRASTRUCTURE (4)

Copies of invoices for the three highest cost items must be attached to the Financial Statement. Copies of the other invoices may be requested by the Commission at anytime. The purchase cost of equipment (new or second-hand), provided that it is depreciated in accordance with the tax and accounting rules applicable to the beneficiary and generally accepted for items of the same kind. Only the portion of the equipment's depreciation corresponding to the correct reporting period and the rate of actual use for the purposes of the action may be taken into account by the Commission, except where the nature and/or the context of its use justifies different treatment by the Commission.

Line N°	Description	Date of the invoice AND invoice number	Quantity	Unit cost	Period in months used for the project during the correct reporting period	Depreciation in months	% Allocation to project	Amount
			A	B	C	D	E	AxBx(C/D)xE
1								#DIV/0!
2								#DIV/0!
3								#DIV/0!
4								#DIV/0!
5								#DIV/0!
6								#DIV/0!
7								#DIV/0!
8								#DIV/0!
9								#DIV/0!
10								#DIV/0!
11								#DIV/0!
12								#DIV/0!
13								#DIV/0!
14								#DIV/0!
15								#DIV/0!
16								#DIV/0!
17								#DIV/0!
18								#DIV/0!
19								#DIV/0!
20								#DIV/0!
Subtotal								0,00

OTHER SPECIFIC COSTS (5)

Copies of invoices for the three highest cost items must be attached to the Financial Statement. Copies of the other invoices may be requested by the Commission at anytime.

Line N°	Name of supplier	Date of the invoice	Invoice number	Description	Amount
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					
Subtotal					0,00

REVENUES OTHER THAN EMFF PROGRAMME AND OWN FUNDING (6)

To be completed only at the FinalStatement. Revenues from the action (3rd parties, sales or other contributions), **excluding** financial contribution of the EMFF programme and own funding.

Line N°	Sources of revenue (3rd parties, sales or other contributions)	Date of funding (dd/mm/yy)	Amount
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			
19			
20			
Subtotal			0,00

Statement by the beneficiary

I certify that:

- the above costs correspond to the resources employed for the work under the agreement and that those resources were necessary for the work,
- the costs were incurred and fall within the definition of eligible costs,
- where necessary, authorisations have been obtained from the Commission, and
- all the documents supporting the allowable costs reported above, including the time records are available for the purposes of audit by the Commission and its authorised representatives or the Court of Auditors and reflect the costs actually incurred.

Date:

Name of the Legal Representative or his/her Authorised Representative

Signature of the Legal Representative or his/her Authorised Representative

Total direct eligible costs

Total eligible costs

Reporting period N°: to

For the period from to

Name of the Beneficiary/Affiliated entity:

My organisation can not claim the VAT back :

STAFF COSTS (1)

Copies of timesheets and justification for labour rate and overhead rate calculations for the three highest cost items must be attached to the Financial Statement. Copies of other timesheets and justification for labour rate and overhead rate calculations may be requested by the Commission at anytime.
 The cost of staff assigned to the action, comprising actual salaries plus social security charges and other statutory costs included in the remuneration, provided that this does not exceed the average rates corresponding to the beneficiary's usual policy on remuneration. Commission will not accept any specific bonuses paid out only for the participation in EU projects.

Line N°	Staff/In house consultants	Name	Category name (e.g. senior expert, engineer, etc.)	Number of person - hours	Hourly rate	Staff costs amount
				A	B	AxB
1						0,00
2						0,00
3						0,00
4						0,00
5						0,00
6						0,00
7						0,00
8						0,00
9						0,00
10						0,00
11						0,00
12						0,00
13						0,00
14						0,00
15						0,00
16						0,00
17						0,00
18						0,00
19						0,00
20						0,00
Subtotal				0,00		0,00

SUBCONTRACTING (2)

Copies of invoices for the three highest cost items must be attached to the Financial Statement. Copies of the other invoices may be requested by the Commission at anytime.
 If the beneficiaries have to conclude contracts in order to carry out the action and they constitute costs of the action under an item of eligible direct costs in the estimated budget, they shall seek competitive offers from potential contractors and award the contract to the bid offering best value for money; in doing so, they shall observe the principle of transparency and equal treatment of potential contractors and shall take care to avoid any conflict of interests.

Line N°	Name of Subcontractor	Date of the invoice	Invoice number	Description of the work undertaken	Amount
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					
Subtotal					0,00

TRAVEL AND SUBSISTENCE (3)

Copies of invoices for the three highest cost items must be attached to the Financial Statement. Copies of other invoices may be requested by the Commission at anytime. Travel and subsistence allowances for staff taking part in the action, provided that they are in line with the beneficiary's usual practices on travel costs or do not exceed the scales approved annually by the Commission.

Line N°	Name	Destination (city, country)	Date (dd/mm/yy)	Duration (days)	Purpose	Amount
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						
17						
18						
19						
20						
Subtotal						0,00

EQUIPMENT AND INFRASTRUCTURE (4)

Copies of invoices for the three highest cost items must be attached to the Financial Statement. Copies of the other invoices may be requested by the Commission at anytime. The purchase cost of equipment (new or second-hand), provided that it is depreciated in accordance with the tax and accounting rules applicable to the beneficiary and generally accepted for items of the same kind. Only the portion of the equipment's depreciation corresponding to the correct reporting period and the rate of actual use for the purposes of the action may be taken into account by the Commission, except where the nature and/or the context of its use justifies different treatment by the Commission.

Line N°	Description	Date of the invoice AND invoice number	Quantity	Unit cost	Period in months used for the project during the correct reporting period	Depreciation in months	% Allocation to project	Amount
			A	B	C	D	E	AxBx(C/D)xE
1								#DIV/0!
2								#DIV/0!
3								#DIV/0!
4								#DIV/0!
5								#DIV/0!
6								#DIV/0!
7								#DIV/0!
8								#DIV/0!
9								#DIV/0!
10								#DIV/0!
11								#DIV/0!
12								#DIV/0!
13								#DIV/0!
14								#DIV/0!
15								#DIV/0!
16								#DIV/0!
17								#DIV/0!
18								#DIV/0!
19								#DIV/0!
20								#DIV/0!
Subtotal								0,00

OTHER SPECIFIC COSTS (5)

Copies of invoices for the three highest cost items must be attached to the Financial Statement. Copies of the other invoices may be requested by the Commission at anytime.

Line N°	Name of supplier	Date of the invoice	Invoice number	Description	Amount
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					
Subtotal					0,00

REVENUES OTHER THAN EMFF PROGRAMME AND OWN FUNDING (6)

To be completed only at the Final Statement. Revenues from the action (3rd parties, sales or other contributions), **excluding** financial contribution of the EMFF programme and own funding.

Line N°	Sources of revenue (3rd parties, sales or other contributions)	Date of funding (dd/mm/yy)	Amount
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			
19			
20			
Subtotal			0,00
Total direct eligible costs			0,00

Statement by the beneficiary

I certify that:

- the above costs correspond to the resources employed for the work under the agreement and that those resources were necessary for the work,
- the costs were incurred and fall within the definition of eligible costs,
- where necessary, authorisations have been obtained from the Commission, and
- all the documents supporting the allowable costs reported above, including the time records are available for the purposes of audit by the Commission and its authorised representatives or the Court of Auditors and reflect the costs actually incurred.

Date:

Name of the Legal Representative or his/her Authorised Representative

Signature of the Legal Representative or his/her Authorised Representative

Total eligible costs **0,00**

Reporting period N°: to
 For the period from to
 Name of the Beneficiary/Affiliated entity:
 My organisation can not claim the VAT back :

STAFF COSTS (1)

Copies of timesheets and justification for labour rate and overhead rate calculations for the three highest cost items must be attached to the Financial Statement. Copies of other timesheets and justification for labour rate and overhead rate calculations may be requested by the Commission at anytime.
 The cost of staff assigned to the action, comprising actual salaries plus social security charges and other statutory costs included in the remuneration, provided that this does not exceed the average rates corresponding to the beneficiary's usual policy on remuneration. Commission will not accept any specific bonuses paid out only for the participation in EU projects.

Line N°	Staff/In-house consultants	Name	Category name (e.g. senior expert, engineer, etc.)	Number of person-hours	Hourly rate	Staff costs amount
				A	B	AxB
1						0,00
2						0,00
3						0,00
4						0,00
5						0,00
6						0,00
7						0,00
8						0,00
9						0,00
10						0,00
11						0,00
12						0,00
13						0,00
14						0,00
15						0,00
16						0,00
17						0,00
18						0,00
19						0,00
20						0,00
Subtotal				0,00		0,00

SUBCONTRACTING (2)

Copies of invoices for the three highest cost items must be attached to the Financial Statement. Copies of the other invoices may be requested by the Commission at anytime.
 If the beneficiaries have to conclude contracts in order to carry out the action and they constitute costs of the action under an item of eligible direct costs in the estimated budget, they shall seek competitive offers from potential contractors and award the contract to the bid offering best value for money; in doing so, they shall observe the principle of transparency and equal treatment of potential contractors and shall take care to avoid any conflict of interests.

Line N°	Name of Subcontractor	Date of the invoice	Invoice number	Description of the work undertaken	Amount
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					
Subtotal					0,00

TRAVEL AND SUBSISTENCE (3)

Copies of invoices for the three highest cost items must be attached to the Financial Statement. Copies of other invoices may be requested by the Commission at anytime. Travel and subsistence allowances for staff taking part in the action, provided that they are in line with the beneficiary's usual practices on travel costs or do not exceed the scales approved annually by the Commission.

Line N°	Name	Destination (city, country)	Date (dd/mm/yy)	Duration (days)	Purpose	Amount
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						
17						
18						
19						
20						
Subtotal						0,00

EQUIPMENT AND INFRASTRUCTURE (4)

Copies of invoices for the three highest cost items must be attached to the Financial Statement. Copies of the other invoices may be requested by the Commission at anytime. The purchase cost of equipment (new or second-hand), provided that it is depreciated in accordance with the tax and accounting rules applicable to the beneficiary and generally accepted for items of the same kind. Only the portion of the equipment's depreciation corresponding to the correct reporting period and the rate of actual use for the purposes of the action may be taken into account by the Commission, except where the nature and/or the context of its use justifies different treatment by the Commission.

Line N°	Description	Date of the invoice AND invoice number	Quantity	Unit cost	Period in months used for the project during the correct reporting period	Depreciation in months	% Allocation to project	Amount
			A	B	C	D	E	AxBx(C/D)xE
1								#DIV/0!
2								#DIV/0!
3								#DIV/0!
4								#DIV/0!
5								#DIV/0!
6								#DIV/0!
7								#DIV/0!
8								#DIV/0!
9								#DIV/0!
10								#DIV/0!
11								#DIV/0!
12								#DIV/0!
13								#DIV/0!
14								#DIV/0!
15								#DIV/0!
16								#DIV/0!
17								#DIV/0!
18								#DIV/0!
19								#DIV/0!
20								#DIV/0!
Subtotal								0,00

OTHER SPECIFIC COSTS (5)

Copies of invoices for the three highest cost items must be attached to the Financial Statement. Copies of the other invoices may be requested by the Commission at anytime.

Line N°	Name of supplier	Date of the invoice	Invoice number	Description	Amount
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					
Subtotal					0,00

REVENUES OTHER THAN EMFF PROGRAMME AND OWN FUNDING (6)

To be completed only at the Final Statement. Revenues from the action (3rd parties, sales or other contributions), **excluding** financial contribution of the EMFF programme and own funding.

Line N°	Sources of revenue (3rd parties, sales or other contributions)	Date of funding (dd/mm/yy)	Amount
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			
19			
20			
Subtotal			0,00

Statement by the beneficiary

I certify that:

- the above costs correspond to the resources employed for the work under the agreement and that those resources were necessary for the work,
- the costs were incurred and fall within the definition of eligible costs,
- where necessary, authorisations have been obtained from the Commission, and
- all the documents supporting the allowable costs reported above, including the time records are available for the purposes of audit by the Commission and its authorised representatives or the Court of Auditors and reflect the costs actually incurred.

Date:

Name of the Legal Representative or his/her Authorised Representative

Signature of the Legal Representative or his/her Authorised Representative

Total direct eligible costs
Total eligible costs

0,00
0,00

Reporting period N°: to

For the period from to

Name of the Beneficiary/Affiliated entity:

My organisation can not claim the VAT back :

STAFF COSTS (1)

Copies of timesheets and justification for labour rate and overhead rate calculations for the three highest cost items must be attached to the Financial Statement. Copies of other timesheets and justification for labour rate and overhead rate calculations may be requested by the Commission at anytime.
 The cost of staff assigned to the action, comprising actual salaries plus social security charges and other statutory costs included in the remuneration, provided that this does not exceed the average rates corresponding to the beneficiary's usual policy on remuneration. Commission will not accept any specific bonuses paid out only for the participation in EU projects.

Line N°	Staff/In house consultants	Name	Category name (e.g. senior expert, engineer, etc.)	Number of person - hours	Hourly rate	Staff costs amount
				A	B	AxB
1						0,00
2						0,00
3						0,00
4						0,00
5						0,00
6						0,00
7						0,00
8						0,00
9						0,00
10						0,00
11						0,00
12						0,00
13						0,00
14						0,00
15						0,00
16						0,00
17						0,00
18						0,00
19						0,00
20						0,00
Subtotal				0,00		0,00

SUBCONTRACTING (2)

Copies of invoices for the three highest cost items must be attached to the Financial Statement. Copies of the other invoices may be requested by the Commission at anytime.
 If the beneficiaries have to conclude contracts in order to carry out the action and they constitute costs of the action under an item of eligible direct costs in the estimated budget, they shall seek competitive offers from potential contractors and award the contract to the bid offering best value for money; in doing so, they shall observe the principle of transparency and equal treatment of potential contractors and shall take care to avoid any conflict of interests.

Line N°	Name of Subcontractor	Date of the invoice	Invoice number	Description of the work undertaken	Amount
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					
Subtotal					0,00

TRAVEL AND SUBSISTENCE (3)

Copies of invoices for the three highest cost items must be attached to the Financial Statement. Copies of other invoices may be requested by the Commission at anytime. Travel and subsistence allowances for staff taking part in the action, provided that they are in line with the beneficiary's usual practices on travel costs or do not exceed the scales approved annually by the Commission.

Line N°	Name	Destination (city, country)	Date (dd/mm/yy)	Duration (days)	Purpose	Amount
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						
17						
18						
19						
20						
Subtotal						0,00

EQUIPMENT AND INFRASTRUCTURE (4)

Copies of invoices for the three highest cost items must be attached to the Financial Statement. Copies of the other invoices may be requested by the Commission at anytime. The purchase cost of equipment (new or second-hand), provided that it is depreciated in accordance with the tax and accounting rules applicable to the beneficiary and generally accepted for items of the same kind. Only the portion of the equipment's depreciation corresponding to the correct reporting period and the rate of actual use for the purposes of the action may be taken into account by the Commission, except where the nature and/or the context of its use justifies different treatment by the Commission.

Line N°	Description	Date of the invoice AND invoice number	Quantity	Unit cost	Period in months used for the project during the correct reporting period	Depreciation in months	% Allocation to project	Amount
			A	B	C	D	E	AxBx(C/D)xE
1								#DIV/0!
2								#DIV/0!
3								#DIV/0!
4								#DIV/0!
5								#DIV/0!
6								#DIV/0!
7								#DIV/0!
8								#DIV/0!
9								#DIV/0!
10								#DIV/0!
11								#DIV/0!
12								#DIV/0!
13								#DIV/0!
14								#DIV/0!
15								#DIV/0!
16								#DIV/0!
17								#DIV/0!
18								#DIV/0!
19								#DIV/0!
20								#DIV/0!
Subtotal								0,00

OTHER SPECIFIC COSTS (5)

Copies of invoices for the three highest cost items must be attached to the Financial Statement. Copies of the other invoices may be requested by the Commission at anytime.

Line N°	Name of supplier	Date of the invoice	Invoice number	Description	Amount
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					
Subtotal					0,00

REVENUES OTHER THAN EMFF PROGRAMME AND OWN FUNDING (6)

To be completed only at the Final Statement. Revenues from the action (3rd parties, sales or other contributions), **excluding** financial contribution of the EMFF programme and own funding.

Line N°	Sources of revenue (3rd parties, sales or other contributions)	Date of funding (dd/mm/yy)	Amount
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			
19			
20			
Subtotal			0,00

Statement by the beneficiary

I certify that:

- the above costs correspond to the resources employed for the work under the agreement and that those resources were necessary for the work,
- the costs were incurred and fall within the definition of eligible costs,
- where necessary, authorisations have been obtained from the Commission, and
- all the documents supporting the allowable costs reported above, including the time records are available for the purposes of audit by the Commission and its authorised representatives or the Court of Auditors and reflect the costs actually incurred.

Date:

Name of the Legal Representative or his/her Authorised Representative

Signature of the Legal Representative or his/her Authorised Representative

Total direct eligible costs
Total eligible costs

Reporting period N°: to

For the period from to

Name of the Beneficiary/Affiliated entity:

My organisation can not claim the VAT back :

STAFF COSTS (1)

Copies of timesheets and justification for labour rate and overhead rate calculations for the three highest cost items must be attached to the Financial Statement. Copies of other timesheets and justification for labour rate and overhead rate calculations may be requested by the Commission at anytime.
 The cost of staff assigned to the action, comprising actual salaries plus social security charges and other statutory costs included in the remuneration, provided that this does not exceed the average rates corresponding to the beneficiary's usual policy on remuneration. Commission will not accept any specific bonuses paid out only for the participation in EU projects.

Line N°	Staff/In-house consultants	Name	Category name (e.g. senior expert, engineer, etc.)	Number of person - hours	Hourly rate	Staff costs amount
				A	B	AxB
1						0,00
2						0,00
3						0,00
4						0,00
5						0,00
6						0,00
7						0,00
8						0,00
9						0,00
10						0,00
11						0,00
12						0,00
13						0,00
14						0,00
15						0,00
16						0,00
17						0,00
18						0,00
19						0,00
20						0,00
				Subtotal	0,00	0,00

SUBCONTRACTING (2)

Copies of invoices for the three highest cost items must be attached to the Financial Statement. Copies of the other invoices may be requested by the Commission at anytime.
 If the beneficiaries have to conclude contracts in order to carry out the action and they constitute costs of the action under an item of eligible direct costs in the estimated budget, they shall seek competitive offers from potential contractors and award the contract to the bid offering best value for money; in doing so, they shall observe the principle of transparency and equal treatment of potential contractors and shall take care to avoid any conflict of interests.

Line N°	Name of Subcontractor	Date of the invoice	Invoice number	Description of the work undertaken	Amount	
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						
17						
18						
19						
20						
					Subtotal	0,00

TRAVEL AND SUBSISTENCE (3)

Copies of invoices for the three highest cost items must be attached to the Financial Statement. Copies of other invoices may be requested by the Commission at anytime. Travel and subsistence allowances for staff taking part in the action, provided that they are in line with the beneficiary's usual practices on travel costs or do not exceed the scales approved annually by the Commission.

Line N°	Name	Destination (city, country)	Date (dd/mm/yy)	Duration (days)	Purpose	Amount
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						
17						
18						
19						
20						
Subtotal						0,00

EQUIPMENT AND INFRASTRUCTURE (4)

Copies of invoices for the three highest cost items must be attached to the Financial Statement. Copies of the other invoices may be requested by the Commission at anytime. The purchase cost of equipment (new or second-hand), provided that it is depreciated in accordance with the tax and accounting rules applicable to the beneficiary and generally accepted for items of the same kind. Only the portion of the equipment's depreciation corresponding to the correct reporting period and the rate of actual use for the purposes of the action may be taken into account by the Commission, except where the nature and/or the context of its use justifies different treatment by the Commission.

Line N°	Description	Date of the invoice AND invoice number	Quantity	Unit cost	Period in months used for the project during the correct reporting period	Depreciation in months	% Allocation to project	Amount
			A	B	C	D	E	AxBx(C/D)xE
1								#DIV/0!
2								#DIV/0!
3								#DIV/0!
4								#DIV/0!
5								#DIV/0!
6								#DIV/0!
7								#DIV/0!
8								#DIV/0!
9								#DIV/0!
10								#DIV/0!
11								#DIV/0!
12								#DIV/0!
13								#DIV/0!
14								#DIV/0!
15								#DIV/0!
16								#DIV/0!
17								#DIV/0!
18								#DIV/0!
19								#DIV/0!
20								#DIV/0!
Subtotal								0,00

OTHER SPECIFIC COSTS (5)

Copies of invoices for the three highest cost items must be attached to the Financial Statement. Copies of the other invoices may be requested by the Commission at anytime.

Line N°	Name of supplier	Date of the invoice	Invoice number	Description	Amount
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					
Subtotal					0,00

REVENUES OTHER THAN EMFF PROGRAMME AND OWN FUNDING (6)

To be completed only at the Final Statement. Revenues from the action (3rd parties, sales or other contributions), **excluding** financial contribution of the EMFF programme and own funding.

Line N°	Sources of revenue (3rd parties, sales or other contributions)	Date of funding (dd/mm/yy)	Amount
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			
19			
20			
Subtotal			0,00

Statement by the beneficiary

I certify that:

- the above costs correspond to the resources employed for the work under the agreement and that those resources were necessary for the work,
- the costs were incurred and fall within the definition of eligible costs,
- where necessary, authorisations have been obtained from the Commission, and
- all the documents supporting the allowable costs reported above, including the time records are available for the purposes of audit by the Commission and its authorised representatives or the Court of Auditors and reflect the costs actually incurred.

Date:

Name of the Legal Representative or his/her Authorised Representative

Signature of the Legal Representative or his/her Authorised Representative

Total direct eligible costs
Total eligible costs

Reporting period N°:

For the period from to

Name of the Beneficiary/Affiliated entity:

My organisation can not claim the VAT back :

STAFF COSTS (1)

Copies of timesheets and justification for labour rate and overhead rate calculations for the three highest cost items must be attached to the Financial Statement. Copies of other timesheets and justification for labour rate and overhead rate calculations may be requested by the Commission at anytime.
The cost of staff assigned to the action, comprising actual salaries plus social security charges and other statutory costs included in the remuneration, provided that this does not exceed the average rates corresponding to the beneficiary's usual policy on remuneration. Commission will not accept any specific bonuses paid out only for the participation in EU projects.

Line N°	Staff/in house consultants	Name	Category name (e.g. senior expert, engineer, etc.)	Number of person - hours	Hourly rate	Staff costs amount
				A	B	AxB
1						0,00
2						0,00
3						0,00
4						0,00
5						0,00
6						0,00
7						0,00
8						0,00
9						0,00
10						0,00
11						0,00
12						0,00
13						0,00
14						0,00
15						0,00
16						0,00
17						0,00
18						0,00
19						0,00
20						0,00
Subtotal				0,00		0,00

SUBCONTRACTING (2)

Copies of invoices for the three highest cost items must be attached to the Financial Statement. Copies of the other invoices may be requested by the Commission at anytime.
If the beneficiaries have to conclude contracts in order to carry out the action and they constitute costs of the action under an item of eligible direct costs in the estimated budget, they shall seek competitive offers from potential contractors and award the contract to the bid offering best value for money; in doing so, they shall observe the principle of transparency and equal treatment of potential contractors and shall take care to avoid any conflict of interests.

Line N°	Name of Subcontractor	Date of the invoice	Invoice number	Description of the work undertaken	Amount
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					
Subtotal					0,00

TRAVEL AND SUBSISTENCE (3)

Copies of invoices for the three highest cost items must be attached to the Financial Statement. Copies of other invoices may be requested by the Commission at anytime. Travel and subsistence allowances for staff taking part in the action, provided that they are in line with the beneficiary's usual practices on travel costs or do not exceed the scales approved annually by the Commission.

Line N°	Name	Destination (city, country)	Date (dd/mm/yy)	Duration (days)	Purpose	Amount
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						
17						
18						
19						
20						
Subtotal						0,00

EQUIPMENT AND INFRASTRUCTURE (4)

Copies of invoices for the three highest cost items must be attached to the Financial Statement. Copies of the other invoices may be requested by the Commission at anytime. The purchase cost of equipment (new or second-hand), provided that it is depreciated in accordance with the tax and accounting rules applicable to the beneficiary and generally accepted for items of the same kind. Only the portion of the equipment's depreciation corresponding to the correct reporting period and the rate of actual use for the purposes of the action may be taken into account by the Commission, except where the nature and/or the context of its use justifies different treatment by the Commission.

Line N°	Description	Date of the invoice AND invoice number	Quantity	Unit cost	Period in months used for the project during the correct reporting period	Depreciation in months	% Allocation to project	Amount
			A	B	C	D	E	AxBx(C/D)xE
1								#DIV/0!
2								#DIV/0!
3								#DIV/0!
4								#DIV/0!
5								#DIV/0!
6								#DIV/0!
7								#DIV/0!
8								#DIV/0!
9								#DIV/0!
10								#DIV/0!
11								#DIV/0!
12								#DIV/0!
13								#DIV/0!
14								#DIV/0!
15								#DIV/0!
16								#DIV/0!
17								#DIV/0!
18								#DIV/0!
19								#DIV/0!
20								#DIV/0!
Subtotal								0,00

OTHER SPECIFIC COSTS (5)

Copies of invoices for the three highest cost items must be attached to the Financial Statement. Copies of the other invoices may be requested by the Commission at anytime.

Line N°	Name of supplier	Date of the invoice	Invoice number	Description	Amount
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					
Subtotal					0,00

REVENUES OTHER THAN EMFF PROGRAMME AND OWN FUNDING (6)

To be completed only at the Final Statement. Revenues from the action (3rd parties, sales or other contributions), **excluding** financial contribution of the EMFF programme and own funding.

Line N°	Sources of revenue (3rd parties, sales or other contributions)	Date of funding (dd/mm/yy)	Amount
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			
19			
20			
Subtotal			0,00

Statement by the beneficiary

I certify that:

- the above costs correspond to the resources employed for the work under the agreement and that those resources were necessary for the work,
- the costs were incurred and fall within the definition of eligible costs,
- where necessary, authorisations have been obtained from the Commission, and
- all the documents supporting the allowable costs reported above, including the time records are available for the purposes of audit by the Commission and its authorised representatives or the Court of Auditors and reflect the costs actually incurred.

Date:

Name of the Legal Representative or his/her Authorised Representative

Signature of the Legal Representative or his/her Authorised Representative

Total direct eligible costs
Total eligible costs

Reporting period N°: to
 For the period from to
 Name of the Beneficiary/Affiliated entity:
 My organisation can not claim the VAT back :

STAFF COSTS (1)

Copies of timesheets and justification for labour rate and overhead rate calculations for the three highest cost items must be attached to the Financial Statement. Copies of other timesheets and justification for labour rate and overhead rate calculations may be requested by the Commission at anytime.
 The cost of staff assigned to the action, comprising actual salaries plus social security charges and other statutory costs included in the remuneration, provided that this does not exceed the average rates corresponding to the beneficiary's usual policy on remuneration. Commission will not accept any specific bonuses paid out only for the participation in EU projects.

Line N°	Staff/In-house consultants	Name	Category name (e.g. senior expert, engineer, etc.)	Number of person - hours	Hourly rate	Staff costs amount
				A	B	AxB
1						0,00
2						0,00
3						0,00
4						0,00
5						0,00
6						0,00
7						0,00
8						0,00
9						0,00
10						0,00
11						0,00
12						0,00
13						0,00
14						0,00
15						0,00
16						0,00
17						0,00
18						0,00
19						0,00
20						0,00
Subtotal				0,00		0,00

SUBCONTRACTING (2)

Copies of invoices for the three highest cost items must be attached to the Financial Statement. Copies of the other invoices may be requested by the Commission at anytime.
 If the beneficiaries have to conclude contracts in order to carry out the action and they constitute costs of the action under an item of eligible direct costs in the estimated budget, they shall seek competitive offers from potential contractors and award the contract to the bid offering best value for money; in doing so, they shall observe the principle of transparency and equal treatment of potential contractors and shall take care to avoid any conflict of interests.

Line N°	Name of Subcontractor	Date of the invoice	Invoice number	Description of the work undertaken	Amount
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					
Subtotal					0,00

TRAVEL AND SUBSISTENCE (3)

Copies of invoices for the three highest cost items must be attached to the Financial Statement. Copies of other invoices may be requested by the Commission at anytime. Travel and subsistence allowances for staff taking part in the action, provided that they are in line with the beneficiary's usual practices on travel costs or do not exceed the scales approved annually by the Commission.

Line N°	Name	Destination (city, country)	Date (dd/mm/yy)	Duration (days)	Purpose	Amount
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						
17						
18						
19						
20						
Subtotal						0,00

EQUIPMENT AND INFRASTRUCTURE (4)

Copies of invoices for the three highest cost items must be attached to the Financial Statement. Copies of the other invoices may be requested by the Commission at anytime. The purchase cost of equipment (new or second-hand), provided that it is depreciated in accordance with the tax and accounting rules applicable to the beneficiary and generally accepted for items of the same kind. Only the portion of the equipment's depreciation corresponding to the correct reporting period and the rate of actual use for the purposes of the action may be taken into account by the Commission, except where the nature and/or the context of its use justifies different treatment by the Commission.

Line N°	Description	Date of the invoice AND invoice number	Quantity	Unit cost	Period in months used for the project during the correct reporting period	Depreciation in months	% Allocation to project	Amount
			A	B	C	D	E	AxBx(C/D)xE
1								#DIV/0!
2								#DIV/0!
3								#DIV/0!
4								#DIV/0!
5								#DIV/0!
6								#DIV/0!
7								#DIV/0!
8								#DIV/0!
9								#DIV/0!
10								#DIV/0!
11								#DIV/0!
12								#DIV/0!
13								#DIV/0!
14								#DIV/0!
15								#DIV/0!
16								#DIV/0!
17								#DIV/0!
18								#DIV/0!
19								#DIV/0!
20								#DIV/0!
Subtotal								0,00

OTHER SPECIFIC COSTS (5)

Copies of invoices for the three highest cost items must be attached to the Financial Statement. Copies of the other invoices may be requested by the Commission at anytime.

Line N°	Name of supplier	Date of the invoice	Invoice number	Description	Amount
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					
Subtotal					0,00

REVENUES OTHER THAN EMFF PROGRAMME AND OWN FUNDING (6)

To be completed only at the Final Statement. Revenues from the action (3rd parties, sales or other contributions), **excluding** financial contribution of the EMFF programme and own funding.

Line N°	Sources of revenue (3rd parties, sales or other contributions)	Date of funding (dd/mm/yy)	Amount
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			
19			
20			
Subtotal			0,00

Total direct eligible costs 0,00

Statement by the beneficiary

I certify that:

- the above costs correspond to the resources employed for the work under the agreement and that those resources were necessary for the work,
- the costs were incurred and fall within the definition of eligible costs,
- where necessary, authorisations have been obtained from the Commission, and
- all the documents supporting the allowable costs reported above, including the time records are available for the purposes of audit by the Commission and its authorised representatives or the Court of Auditors and reflect the costs actually incurred.

Total eligible costs 0,00

Date:

Name of the Legal Representative or his/her Authorised Representative

Signature of the Legal Representative or his/her Authorised Representative

Reporting period N°: to
 For the period from to
 Name of the Beneficiary/Affiliated entity:
 My organisation can not claim the VAT back :

STAFF COSTS (1)

Copies of timesheets and justification for labour rate and overhead rate calculations for the three highest cost items must be attached to the Financial Statement. Copies of other timesheets and justification for labour rate and overhead rate calculations may be requested by the Commission at anytime.
 The cost of staff assigned to the action, comprising actual salaries plus social security charges and other statutory costs included in the remuneration, provided that this does not exceed the average rates corresponding to the beneficiary's usual policy on remuneration. Commission will not accept any specific bonuses paid out only for the participation in EU projects.

Line N°	Staff/In-house consultants	Name	Category name (e.g. senior expert, engineer, etc.)	Number of person - hours	Hourly rate	Staff costs amount
				A	B	AxB
1						0,00
2						0,00
3						0,00
4						0,00
5						0,00
6						0,00
7						0,00
8						0,00
9						0,00
10						0,00
11						0,00
12						0,00
13						0,00
14						0,00
15						0,00
16						0,00
17						0,00
18						0,00
19						0,00
20						0,00
Subtotal				0,00		0,00

SUBCONTRACTING (2)

Copies of invoices for the three highest cost items must be attached to the Financial Statement. Copies of the other invoices may be requested by the Commission at anytime.
 If the beneficiaries have to conclude contracts in order to carry out the action and they constitute costs of the action under an item of eligible direct costs in the estimated budget, they shall seek competitive offers from potential contractors and award the contract to the bid offering best value for money; in doing so, they shall observe the principle of transparency and equal treatment of potential contractors and shall take care to avoid any conflict of interests.

Line N°	Name of Subcontractor	Date of the invoice	Invoice number	Description of the work undertaken	Amount
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					
Subtotal					0,00

TRAVEL AND SUBSISTENCE (3)

Copies of invoices for the three highest cost items must be attached to the Financial Statement. Copies of other invoices may be requested by the Commission at anytime. Travel and subsistence allowances for staff taking part in the action, provided that they are in line with the beneficiary's usual practices on travel costs or do not exceed the scales approved annually by the Commission.

Line N°	Name	Destination (city, country)	Date (dd/mm/yy)	Duration (days)	Purpose	Amount
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						
17						
18						
19						
20						
Subtotal						0,00

EQUIPMENT AND INFRASTRUCTURE (4)

Copies of invoices for the three highest cost items must be attached to the Financial Statement. Copies of the other invoices may be requested by the Commission at anytime. The purchase cost of equipment (new or second-hand), provided that it is depreciated in accordance with the tax and accounting rules applicable to the beneficiary and generally accepted for items of the same kind. Only the portion of the equipment's depreciation corresponding to the correct reporting period and the rate of actual use for the purposes of the action may be taken into account by the Commission, except where the nature and/or the context of its use justifies different treatment by the Commission.

Line N°	Description	Date of the invoice AND invoice number	Quantity	Unit cost	Period in months used for the project during the correct reporting period	Depreciation in months	% Allocation to project	Amount
			A	B	C	D	E	AxBx(C/D)xE
1								#DIV/0!
2								#DIV/0!
3								#DIV/0!
4								#DIV/0!
5								#DIV/0!
6								#DIV/0!
7								#DIV/0!
8								#DIV/0!
9								#DIV/0!
10								#DIV/0!
11								#DIV/0!
12								#DIV/0!
13								#DIV/0!
14								#DIV/0!
15								#DIV/0!
16								#DIV/0!
17								#DIV/0!
18								#DIV/0!
19								#DIV/0!
20								#DIV/0!
Subtotal								0,00

OTHER SPECIFIC COSTS (5)

Copies of invoices for the three highest cost items must be attached to the Financial Statement. Copies of the other invoices may be requested by the Commission at anytime.

Line N°	Name of supplier	Date of the invoice	Invoice number	Description	Amount
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					
Subtotal					0,00

REVENUES OTHER THAN EMFF PROGRAMME AND OWN FUNDING (6)

To be completed only at the Final Statement. Revenues from the action (3rd parties, sales or other contributions), **excluding** financial contribution of the EMFF programme and own funding.

Line N°	Sources of revenue (3rd parties, sales or other contributions)	Date of funding (dd/mm/yy)	Amount
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			
19			
20			
Subtotal			0,00
Total direct eligible costs			0,00

Statement by the beneficiary

I certify that:

- the above costs correspond to the resources employed for the work under the agreement and that those resources were necessary for the work,
- the costs were incurred and fall within the definition of eligible costs,
- where necessary, authorisations have been obtained from the Commission, and
- all the documents supporting the allowable costs reported above, including the time records are available for the purposes of audit by the Commission and its authorised representatives or the Court of Auditors and reflect the costs actually incurred.

Total eligible costs 0,00

Date:

Name of the Legal Representative or his/her Authorised Representative

Signature of the Legal Representative or his/her Authorised Representative

Reporting period N°: to

For the period from to

Name of the Beneficiary/Affiliated entity:

My organisation can not claim the VAT back :

STAFF COSTS (1)

Copies of timesheets and justification for labour rate and overhead rate calculations for the three highest cost items must be attached to the Financial Statement. Copies of other timesheets and justification for labour rate and overhead rate calculations may be requested by the Commission at anytime.
 The cost of staff assigned to the action, comprising actual salaries plus social security charges and other statutory costs included in the remuneration, provided that this does not exceed the average rates corresponding to the beneficiary's usual policy on remuneration. Commission will not accept any specific bonuses paid out only for the participation in EU projects.

Line N°	Staff/in-house consultants	Name	Category name (e.g. senior expert, engineer, etc.)	Number of person - hours	Hourly rate	Staff costs amount
				A	B	AxB
1						0,00
2						0,00
3						0,00
4						0,00
5						0,00
6						0,00
7						0,00
8						0,00
9						0,00
10						0,00
11						0,00
12						0,00
13						0,00
14						0,00
15						0,00
16						0,00
17						0,00
18						0,00
19						0,00
20						0,00
Subtotal				0,00		0,00

SUBCONTRACTING (2)

Copies of invoices for the three highest cost items must be attached to the Financial Statement. Copies of the other invoices may be requested by the Commission at anytime.
 If the beneficiaries have to conclude contracts in order to carry out the action and they constitute costs of the action under an item of eligible direct costs in the estimated budget, they shall seek competitive offers from potential contractors and award the contract to the bid offering best value for money; in doing so, they shall observe the principle of transparency and equal treatment of potential contractors and shall take care to avoid any conflict of interests.

Line N°	Name of Subcontractor	Date of the invoice	Invoice number	Description of the work undertaken	Amount
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					
Subtotal					0,00

TRAVEL AND SUBSISTENCE (3)

Copies of invoices for the three highest cost items must be attached to the Financial Statement. Copies of other invoices may be requested by the Commission at anytime. Travel and subsistence allowances for staff taking part in the action, provided that they are in line with the beneficiary's usual practices on travel costs or do not exceed the scales approved annually by the Commission.

Line N°	Name	Destination (city, country)	Date (dd/mm/yy)	Duration (days)	Purpose	Amount
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						
17						
18						
19						
20						
Subtotal						0,00

EQUIPMENT AND INFRASTRUCTURE (4)

Copies of invoices for the three highest cost items must be attached to the Financial Statement. Copies of the other invoices may be requested by the Commission at anytime. The purchase cost of equipment (new or second-hand), provided that it is depreciated in accordance with the tax and accounting rules applicable to the beneficiary and generally accepted for items of the same kind. Only the portion of the equipment's depreciation corresponding to the correct reporting period and the rate of actual use for the purposes of the action may be taken into account by the Commission, except where the nature and/or the context of its use justifies different treatment by the Commission.

Line N°	Description	Date of the invoice AND invoice number	Quantity	Unit cost	Period in months used for the project during the correct reporting period	Depreciation in months	% Allocation to project	Amount
			A	B	C	D	E	AxBx(C/D)xE
1								#DIV/0!
2								#DIV/0!
3								#DIV/0!
4								#DIV/0!
5								#DIV/0!
6								#DIV/0!
7								#DIV/0!
8								#DIV/0!
9								#DIV/0!
10								#DIV/0!
11								#DIV/0!
12								#DIV/0!
13								#DIV/0!
14								#DIV/0!
15								#DIV/0!
16								#DIV/0!
17								#DIV/0!
18								#DIV/0!
19								#DIV/0!
20								#DIV/0!
Subtotal								0,00

OTHER SPECIFIC COSTS (5)

Copies of invoices for the three highest cost items must be attached to the Financial Statement. Copies of the other invoices may be requested by the Commission at anytime.

Line N°	Name of supplier	Date of the invoice	Invoice number	Description	Amount
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					
Subtotal					0,00

REVENUES OTHER THAN EMFF PROGRAMME AND OWN FUNDING (6)

To be completed only at the Final Statement. Revenues from the action (3rd parties, sales or other contributions), **excluding** financial contribution of the EMFF programme and own funding.

Line N°	Sources of revenue (3rd parties, sales or other contributions)	Date of funding (dd/mm/yy)	Amount
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			
19			
20			
Subtotal			0,00
Total direct eligible costs			0,00

Statement by the beneficiary

I certify that:

- the above costs correspond to the resources employed for the work under the agreement and that those resources were necessary for the work,
- the costs were incurred and fall within the definition of eligible costs,
- where necessary, authorisations have been obtained from the Commission, and
- all the documents supporting the allowable costs reported above, including the time records are available for the purposes of audit by the Commission and its authorised representatives or the Court of Auditors and reflect the costs actually incurred.

Total eligible costs 0,00

Date:

Name of the Legal Representative or his/her Authorised Representative

Signature of the Legal Representative or his/her Authorised Representative

EUR
BGN
CYP
CZK
DKK
EEK
HUF
LVL
LTL
PLN
RON
SEK
GBP
AED
AFN
ALL
AMD
ANG
AOA
ARS
AUD
AWG
AZN
BAM
BBD
BDT
BHD
BIF
BMD
BND
BOB
BRL
BSD
BTN
BWP
BYR
BZD
CAD
CDF
CHF
CLP
CNY
COP
CRC
CSD
CUC
CVE
DJF
DOP
DZD
EGP
ERN
ETB
FJD
FKP
GEL

GHS
GIP
GMD
GNF
GTQ
GYD
HKD
HNL
HRK
HTG
IDR
ILS
INR
IQD
IRR
ISK
JMD
JOD
JPY
KES
KGS
KHR
KMF
KPW
KRW
KWD
KYD
KZT
LAK
LBP
LKR
LRD
LSL
LYD
MAD
MDL
MGA
MKD
MMK
MNT
MOP
MRO
MUR
MVR
MWK
MXN
MYR
MZN
NAD
NGN
NIO
NOK
NPR
NZD
OMR
PAB

PEN
PGK
PHP
PKR
PYG
QAR
RSD
RUB
RWF
SAR
SBD
SCR
SDG
SGD
SHP
SLL
SOS
SRD
STD
SVC
SYP
SZL
THB
TJS
TMT
TND
TOP
TRY
TTD
TWD
TZS
UAH
UGX
USD
UYU
UZS
VEF
VND
VUV
WST
XAF
XCD
XOF
XPF
YER
YUM
ZAR
ZMK
ZWL