**BILATERAL FUND**

**REQUEST FOR REIMBURSEMENT**

|  |
| --- |
|  |
| 1. Name of the applicant for reimbursement  ................................................................................................................................................................................... |
| 2. Name of the organisation:  ...................................................................................................................................................................................  (full name and type of the applicant organisation) |
| 3. VAT number: |
| 4. Contact address and e-mail: |
| 5. Phone number: |
| 6. Amount for reimbursement (in euro):  (please make sure the amount is the same as the total sum in Annex 2) |

**I hereby certify that all the information in this document, including its annexes, is accurate and complete.**

Date: …………………………………… Signature/stamp: …………………………………………

**This reimbursement form, together with annexes 1 and 2, is to be filled in, printed, signed and sent to the PO.**

*For more information, please contact us:* [*tz.guerdjikova@mon.bg*](mailto:tz.guerdjikova@mon.bg)*,* [*m.valova@mon.bg*](mailto:m.valova@mon.bg) *and* [*m.teodorova@mon.bg*](mailto:m.teodorova@mon.bg)

|  |  |
| --- | --- |
| |  | | --- | | **PROGRAMME OPERATOR’S SECTION** | |
| Decision of the PO:    Approved / Date of payment ……………………………….. |
|  |

Not approved

**ANNEX 1 – FINANCIAL IDENTIFICATION FORM**

**ACCOUNT HOLDER**

**NAME/ORGANISATION:**

**ADDRESS:**

**BANK**

**NAME:**

**BRANCH ADDRESS:**

**ACCOUNT NUMBER:**

**IBAN:**

**BIC/SWIFT:**

**DATE AND SIGNATURE ACCOUNT HOLDER:**

**ANNEX 2 – REPORT**

**Visiting person and position in the organisation:**

**Name of the organisation:**

**Place and purpose of the visit:**

**Outcomes of the visit:**

**Contact details of the visited partners:**

**Travel details:**

1. **Period (from date….....-to date……..):**
2. **Number of days:**
3. **Transport type:**

**Requested amounts:**

1. **Daily allowance (total):**
2. **Accommodation (total):**
3. **Total amount for transport(total):**

**Total:**

**ATTENTION:** Maximum amount of expenditures must not exceed 3000 euro per person**.**

**ATTACHMENTS: (documentary evidence of your travel)**

1. **Invoice from the airline company/travel agent for the transport;**
2. **Proof of payment/Bank statement;**
3. **Boarding passes (if available).**

**SIGNATURE:**