REQUEST FOR PAYMENT

Faculty of Music

Kralja Milana 50

Belgrade 11000

Serbia

REQUEST FOR PAYMENT OF THE RELEVANT BUDGET SHARE OF THE Acronym

PROJECT BENEFICIARY

Name of the Beneficiary

In accordance with the Grant Agreement no. type No. and Partnership Agreement no.type No., and on the basis of the enclosed supporting documents (listed in the Article V of the Partnership Agreement) for expenditures made in the frame of the ERASMUS+ Projecttype name of the project, a Choose an item.payment to the beneficiary Name of the Beneficiary shall be made since the beneficiary has used the entire the previous instalment.

The payment shall be executed in the amount of      EUR, which represents      % of the total budget of the beneficiary.

|  |  |
| --- | --- |
| Amount to be transferred (EUR): | EUR |
| Account holder: |  |
| Bank: |  |
| Address of branch: |  |
| IBAN – International Bank or Account Number – account code: |  |
| Bank or Swift Code: |  |

In      , on pick the date

Legal representative of the Beneficiary

………………………….

(name, surname, signature)