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| Logo of the European Commission, 12 yellow stars on a blue background arranged in a circle and framed by two light grey graphic elements representing the Berlaymont building, which is the headquarter of the European Commission. | EUROPEAN INNOVATION COUNCIL AND SMES  EXECUTIVE AGENCY (EISMEA)    **SMP/Internal Market and Consumers** |

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| **Co-financing statement form**  (to be filled in for each co-financing third party, who is neither an applicant (consortium partner), nor an affiliated entity) | |

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| **Information on the Proposal** | | | | | | | | | | | | | |
| Proposal Full Name |  | | | | | | | | | | | | |
| **Legal Information (legal entity)** | | | | | | | | | | | | | |
| Organisation Legal Name |  | | | | | | | | | | | | |
| Short Name |  | | | | | | | | | | | | |
| Legal Status |  | |  | | | Legal Registration n° | | |  | | | | |
| VAT number |  | | | | | | | | | | | | |
| Business Area |  | | | | | | | | | | | | |
| **Registered Address of the legal entity** | | | | | | | | | | | | | |
| PO Box |  | | | | | | | | | | | | |
| Street Name and Number |  | | | | | | | | | | | | |
| Post Code |  | | | | Cedex | |  | | | | | | |
| Town/City |  | | | | | | | | | | | | |
| Country Name |  | | | | | | | | | | | | |
| **Information concerning participation and involvement** | | | | | | | | | | | | | |
| Amount of funding which the company/ organisation undertakes to provide for the operation (in Euro) | | | | |  | | | | | | | | |
| How and when will the co-financing take place? | | | | |  | | | | | | | | |
| Is the co-financing decision irrevocable?  (if the answer is “No”, please comment) | | | | |  | | | | | | | | |
| **Administrative officer authorised to commit the company/organisation** | | | | | | | | | | | | | |
| Title (Dr, Prof., ...) | |  | | | | | | | |  |  |  |  |
| Family Name | |  | | | | | | | | | | | |
| First Name | |  | | | | | | | | | | | |
| Position in company/organisation | |  | | | | | | | | | | | |
| Telephone n° | |  | | | Fax n° | |  | | | | | | |
| E-mail | |  | | | | | | | | | | | |
| Stamp of company/ organisation | |  | | | | | | | | | | | |
| Date of signature | |  | | Signature of authorised person | | | |  | | | | | |