

Financial report (in EUR)



Name of the proposal: _____



EXPENDITURE

Category of cost	Coordinator		Co-beneficiary #1		Add as many co-applicants as necessary	TOTAL BUDGET	TOTAL COST
	Budget	Actual cost	Budget	Actual cost			
1 Human resources	0,00	0,00	0,00	0,00		0,00	0,00
2 Promotion	0,00	0,00	0,00	0,00		0,00	0,00
3 Equipment	0,00	0,00	0,00	0,00		0,00	0,00
4 Works	0,00	0,00	0,00	0,00		0,00	0,00
5 Services	0,00	0,00	0,00	0,00		0,00	0,00
6 [Other category(ies)]	0,00	0,00	0,00	0,00		0,00	0,00
7 TOTAL DIRECT COSTS	0,00	0,00	0,00	0,00		0,00	0,00
8 Indirect costs (maximum 7% of direct costs)	0,00	0,00	0,00	0,00		0,00	0,00
9 TOTAL ELIGIBLE COSTS	0,00	0,00	0,00	0,00		0,00	0,00



Fondazione di Sardegna



CHAMBER OF COMMERCE, INDUSTRY & AGRICULTURE IN SIDON & SOUTH LEBANON



Summary financial report (in EUR)



Name of the Coordinator



Category of cost	Budget				Actual costs			
	Unit	# units	Unit value	Cost	Unit	# units	Unit value	Cost
1 Human resources	per day/per hour				per day/per hour			
Subproject manager	indicate day or hour			0,00	indicate day or hour			0,00
add as many rows as persons	indicate day or hour			0,00	indicate day or hour			0,00
Total human resources				0,00				0,00
2 Promotion	type of promotion				type of promotion			
Description of promotion	specify type of promotion			0,00	specify type of promotion			0,00
add as many rows as promotions	specify type of promotion			0,00	specify type of promotion			0,00
Total travel and susistence				0,00				0,00
3 Equipment	type of item				type of item			
Description of items	specify type of equipment			0,00	specify type of equipment			0,00
add as many rows as type of equipment	specify type of equipment			0,00	specify type of equipment			0,00
Total equipment				0,00				0,00
4 Works	type of works				type of works			
Identification of works	specify the works			0,00	specify the works			0,00
add as many rows as works	specify the works			0,00	specify the works			0,00
Total works				0,00				0,00
5 Services	type of services/days				type of services/days			
Description of service	specify type of service			0,00	specify type of service			0,00
add as many rows as services	specify type of service			0,00	specify type of service			0,00
Total services				0,00				0,00
6 (Add as many categories as necessary)	type of item				type of item			
Description of item	specify type of item			0,00	specify type of item			0,00
add as many rows as items	specify type of item			0,00	specify type of item			0,00
Total of [category]				0,00				0,00
7 TOTAL DIRECT COSTS				0,00				0,00
8 Indirect costs (müximum 7% of direct costs)				0,00				0,00
9 TOTAL ELIGIBLE COSTS				0,00				0,00



Fondazione di Sardegna



CHAMBER OF COMMERCE
INDUSTRY & AGRICULTURE
IN SIDON & SOUTH LEBANON



Summary financial report (in EUR)

(Add as many sheets as co-beneficiaries)

Name of the Co-beneficiary #

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Fondazione di Sardegna



CHAMBER OF COMMERCE
INDUSTRY & AGRICULTURE
IN SIDON & SOUTH LEBANON



List of expenditure



Name of the Coordinator

1. Human resources

#	Name of the employee	Position	Month	# units (month/days/hours)	Unit value	Eligible cost
1						0,00
2						0,00
n add as many rows as persons/month						0,00
Total human resources						0,00

2. Promotion

#	Name of supplier	Description	Date of invoice	Date of payment	Eligible cost
1					0,00
2					0,00
n add as many rows as suppliers					0,00
Total promotion					0,00

3. Equipment

#	Name of supplier	Description	Date of invoice	Date of payment	Eligible cost
1					0,00
2					0,00
n add as many rows as suppliers					0,00
Total equipment					0,00



4. Works

#	Name of supplier	Description	Date of invoice	Date of payment	Eligible cost





1					0,00
2					0,00
n	add as many rows as suppliers				0,00
Total works					0,00



5. Services

#	Name of supplier	Description	Date of invoice	Date of payment	Eligible cost
1					0,00
2					0,00
n	add as many rows as suppliers				0,00
Total services					0,00

6. [Added category(ies)]

#	Name of supplier	Description	Date of invoice	Date of payment	Eligible cost
1					0,00
2					0,00
n	add as many rows as suppliers				0,00
Total services					0,00

7	TOTAL DIRECT COSTS				0,00
8	Indirect costs (maximum 7% of direct costs)				0,00
9	TOTAL ELIGIBLE COSTS				0,00



List of expenditure



Name of the Co-beneficiary #

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1. Human resources

#	Name of the employee	Position	Month	# units (month/days/hours)	Unit value	Eligible cost
1						0,00
2						0,00
n add as many rows as persons/month						0,00
Total human resources						0,00

2. Travel and subsistence costs

#	Name of supplier or employee	Destination	Description	Date of trip	Date of payment	Eligible cost
1						0,00
2						0,00
n add as many rows as persons/suppliers						0,00
Total travel & accommodation						0,00

3. Equipment

#	Name of supplier	Description	Date of invoice	Date of payment	Eligible cost	
1					0,00	
2					0,00	
n add as many rows as suppliers						
Total equipment						0,00



4. Works

#	Name of supplier	Description	Date of invoice	Date of payment	Eligible cost





1					0,00
2					0,00
n	add as many rows as suppliers				0,00
Total works					0,00



5. Services					
#	Name of supplier	Description	Date of invoice	Date of payment	Eligible cost
1					0,00
2					0,00
n	add as many rows as suppliers				0,00
Total services					0,00

6. [Added category(ies)]					
#	Name of supplier	Description	Date of invoice	Date of payment	Eligible cost
1					0,00
2					0,00
n	add as many rows as suppliers				0,00
Total services					0,00

6	TOTAL DIRECT COSTS				0,00
7	Indirect costs (maximum 7% of direct costs)				0,00
8	TOTAL ELIGIBLE COSTS				0,00



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