FINAL MONITORING REPORT AND PAYMENT REQUEST FOR AN INITIATIVE FROM THE FUND FOR BILATERAL RELATIONS AT NATIONAL LEVEL

EEA and NORWAY GRANTS 2014-2021

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| Initiative identification number: |  |
| Initiative title: |  |

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| **1. Information ABOUT the project promoter** | | | | | |
| **1.1 Identity and contact details** | | | | | |
| **Official name in full** |  | | | | |
| **Statutory representative** | Name, Surname | |  | | |
| **Website / Facebook page** |  | | | | |
| **Contact person(s) responsible for the initiative** | | | | | |
| **Name, Surname** | | **Position/function** | **E-mail address** | **Phone** | **Mobile** |
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| **2. Summary oF implemented initiative** | | | |
| **2.1 Summary of implemented initiative** | *1. Sum up all activities of the initiative which were implemented since its beginning, e.g. what and where was realized, including time schedule and programme of the initiative. Describe any discrepancies towards the application (delays, changes in agenda, participants etc.)?*  *2.  Summarize what was achieved by realization of the initiative/activities?*  *3.  Refer to cooperation with all partners of the initiative, including describing their role. Did everyone participate on the initiative as it was planned prior the start of the initiative? Was cooperation with all partners of the initiative running smoothly?*  *4. Describe the publicity of the initiative.*  *5. If an income was generated by the initiative, describe the use of this income.* | | |
| **2.2 Contribution to strengthening bilateral cooperation** | *- Describe the* ***results*** *of bilateral cooperation. How the proposed activities contributed to strengthening* ***bilateral relations*** *in terms of shared results, improved knowledge and mutual understanding?*  *- What were the main challenges in bilateral cooperation?*  *- How will be gained results/knowledge used in the future?*  *- Is further cooperation after the end of initiative expected?* | | |
| **2.3 Implementation period** | | | |
| **Planned Start Date** |  | **Planned Completion Date** |  |
| **Actual Start Date** | ***DD.MM.YYYY*** | **Actual Completion Date** | ***DD.MM.YYYY*** |

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| **3. BILATERAL INDICATORS** | | | | | | | | | | |
| **Indicator** | | | | **Target value**  *Give the numeric target value of the indicator as stated in the application form.* | | **Achieved value**  *State actually achieved value of the indicator.* | | **Description and source of verification**  *Explain how the indicator was fulfilled and justify the difference against the planned target value in case of discrepancy.* | | |
| **Number of participants from the Czech Republic in bilateral events** | | | |  | |  | |  | | |
| **Number of participants from the Donor States in bilateral events** | | | |  | |  | |  | | |
| **Number of created joint results** | | | |  | |  | |  | | |
| **Number of promotional / information activities raising awareness of EEA and Norway Grants** | | | |  | |  | |  | | |
| **Number of bilateral events co-organized and attended by the Czech Republic entities and Donor State entities** | | | |  | |  | |  | | |
| **4. Budget** | | | | | | | | | |
| **4.1 Indicative budget** | | | | | | | | | |
| **Total planned costs** | |  | | | | | | | |
| **Total spent costs** | |  | | | | | | | |
| **Total eligible costs** | |  | | | | | | | |
| **Advance payment** | | Amount obtained prior implementation: | | | |  | | | |
| Amount requested within the monitoring report reduced on advance payment: | | | |  | | | |
| Amount to be refunded to the NFP | | | |  | | | |
| **4.2 VAT** | | | | | | | | | |
| **VAT within the initiative:** | |  | | | | | | | |
| **4.3 Budget** | | | | | | | | | |
| ***Budget Item*** | ***Allocated amount*** | | | ***Unit*** | ***Number of Units*** | | | ***Spent expenditure*** | ***Eligible expenditure*** |
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| ***TOTAL*** |  | | |  | | | | |  |
| **4.4. Modification of budget** | | | | | | | | | |
| *Explain the difference in utilization of financial means against the plan (application). Include also changes in units if these were realized – if relevant* | | | | | | | | | |

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| **4.5 List of paid documents** | | | | | | | | | | |
| **Budget Item** | **Number of accounting document** | **Description of expenditure** | **Paid on** | **Total expenditure in currency of accounting document (NOK, ISK, EUR, CZK, CHF)** | **Exchange rate to CZK** | **Total expenditure in CZK** | **Total eligible expenditure in CZK** |  |  | **Notes** |
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|  |  | **Planned expenditure of budget item** | **.** | **Spent expenditure of budget item** | **.** | **Total Eligible costs of budget item** |  |  |  |  |
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|  |  | **Planned expenditure of budget item** |  | **Spent expenditure of budget item** |  | **Total Eligible costs of budget item** |  |  |  |  |
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|  | **TOTAL** | **Planned expenditure of initiative** |  | **Spent expenditure of initiative** |  | **Total Eligible costs of initiative (CZK/EUR)** |  |  |  |  |

\* According to the eligibility of VAT within the initiative as stated within the approved Application for the initiative, incl. amendments.

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| **5. Bank identification** | |
| **IBAN:** | **SWIFT-BIC:** |
| **Variable symbol:** |  |
| **Address of the institution of Project Promoter:** |  |
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| **6. Annexes** | |
| *Factual: (i.e. invitations to seminars, study tours programme, meeting agenda)*  *Financial: document for selecting the supplier, a list of paid documents, payments of expenses documents, (orders, bills for transport, invoices, receipts, bank statements, and other travel and accounting documents of equivalent probative value)* | |
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| **7. statutory declaration** |
| I hereby confirm,   1. that all accounting documents / documents for tax records are recorded and kept in our institution 2. that all copies of accounting documents are in accordance with the original |

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| **8. Signature** | | |
| **Name and Surname**  Statutory or Authorized Representative - If signed by the authorized representative, the authorization is required as Annex to the monitoring report (if were not included as an Attachment to the application). | **Date** | **Signature** |
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