

1 Recipient of payment	Name of organisation		
	Address		Employer identification number
	Phone		Fax
	Email		
	Bank connection including the international bank account number (IBAN), SWIFT code and the address of the bank		

2 Decision details	Date of decision		Decision number	
	Research council that made the decision		Funding period	Funding EUR

3 Payments	Date of payment	Instalment to be paid	Specification
	Further details		

4 Signature	Place and date	Signature
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To be filled in by the Academy of Finland

Saapunut		Maksetaan, EUR		Päiväys			
Numerotarkastus / 20		Asiatarkastus / 20		Hyväksyntä / 20			
Kirjanpito		Sisäinen kirjanpito					
Liikekirjanpidon tili	Talousarviotili	Vastuualue	Tehtävä	Projekti	EUR	D/K	
						D	