

1 Recipient of payment	Name of organisation		
	Address		Organisation ID/VAT 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	Name in block letters and Signature
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Please, send your signed payment request to finances@aka.fi

Also send a copy to
ACADEMY OF FINLAND
Finance Administration Unit/Research Projects
POB 5555
01051 INVOICES
FINLAND