

## ADVANCE PAYMENT REQUEST

Title of the bilateral initiative for artistic residency: \_\_\_\_\_

Grant contract number: \_\_\_\_\_

### Applicant

Name: \_\_\_\_\_

Acronym: \_\_\_\_\_

Organization number/fiscal code: \_\_\_\_\_

I ....., *<information from ID card/passport eg. series, number, type>*, as legal representative of organization *<name of the organisation>*, following the signing of the grant contract with an eligible value of *<.....>* Euro/Lei (*<value written out in full>* Euro/Lei) for the bilateral initiative mentioned above, to be implemented within *Cultural Entrepreneurship, Cultural Heritage and Cultural Exchange* Programme (RO-CULTURA), funded through the EEA Financial Mechanism 2014-2021, request:

- an advance payment of *<.....>* Euro/Lei, representing *<percentage>*% of the approved grant.

The payment shall be made in the following account:

- *<account number>*, opened at *<name of bank>*.

Name and surname of the legal representative:

Position:

Signature of the legal representative:  
Stamp (if applicable)

Date and place: