**ANNEX 3: Partner Request for payment**

**Partner Request for payment**

[*Date of the request for payment*]

For the attention of

**University of Novi Sad**

**Prof. Dr. Vlastimir Radonjanin**

**Dr Zorana Djindjica 1**

**21000 Novi Sad**

**Serbia**

Project title: **Knowledge FOr Resilient soCiEty**

Acronym: **K-FORCE**

Project number: **573942-EPP-1-2016-1-RS-EPPKA2-CBHE-JP**

Grant Agreement number: **2016-2559/001-001**

Name and address of the Project Partner:

***name of project partner***

***address of project partner***

Request for payment number: ***number/year***

Dear Sir/Madam,

1. hereby request ***number (e.g. 1st, 2nd,…)*** installment of the Erasmus+ grant contribution under the Grant Agreement mentioned above, and based on the Partnership Agreement.

The amount requested is ***amount*** € (*this amount is firstly agreed with the Project Manager-Danijela Ciric*)

The payment should be made to the bank account of our institution defined in Article V of the Partnership Agreement.

Stamp

Signature of the beneficiary legal representative

Position: …………………………

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name:……………………………