

Appendix 1 – Investment recipient is a state institution or state-funded self-governing institution

FINANCIAL CONTROLLER’S DECLARATION UPON RECEIPT OF INVESTMENT FROM INNOVATION FUND DENMARK

Case no.: _____

Title of project: _____

Investment recipient: _____

Start date of accounting period: _____

End date of accounting period: _____

Actual expenditure: _____

Investment from Innovation Fund Denmark: _____

(investment received – transferred from the Administrator, **not** the budgeted investment sum)

It is hereby confirmed that the financial report is in agreement with the conditions described in *General Terms and Conditions for Grand Solutions* and the *Investment Agreement* between the project participants and Innovation Fund Denmark.

Any qualifications on part of the financial controller:

Date

Name of financial controller

Title of financial controller

Address of financial controller

Signature of financial controller