**Please return this form to both e-mails:****perab@uek.krakow.pl** **and** **kieraso@uek.krakow.pl**

Ms. **Olga Kieras-Kogut**, M.Sc.Independent Accountant
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**PRO FORMA INVOICE**(can be issued before the payment)

**FINAL INVOICE**(will be issued after the payment)

**PAYER:**

|  |  |
| --- | --- |
| ***Name of the payer /university/:*** *[Nazwa płatnika]* |  |
| ***Full Address of the Payer:*** *[Adres płatnika]*  |  |
| ***Taxation Number / if needed/****[NIP]*  |  |
| ***Fee (e.g. 350 EUR)*** *[kwota opłaty:]* |  |
| ***Transaction Title + Annotation*** *[Tytuł przelewu + uczestnik]* *Give names ONLY of the active participants attending the conference, not all the co-authors!*  | AIB-CEE 2018, participant: …………………………….. |
|  |  |
| ***Type of the invoice****[Rodzaj faktury]* | ❑ ONLY electronic invoice (via an e-mail) [*e-faktura*]❑ ONLY paper invoice (via a traditional mail) [*papierowa*] |
| ***Address the invoice should be sent to:*** *[adres wysyłki faktury]*  |  |