

RECEIPT for the settlement of expense reimbursements

to the ASSOCIATION

ARTISTIC DIRECTION

PROJECT

work stage

Surname

Name

Address

Date of birth

Email

Telephone

1) EXPENSES in CHF

Description	Total CHF

TOTAL AMOUNT TO BE REIMBURSED (in CHF)

2) EXPENSES in EURO

Description	Total €

TOTAL AMOUNT TO BE REIMBURSED (in EUROS)

4) PAYMENT METHOD

Transfer to account

IBAN

Place and Date

Signature
