|  |  |  |
| --- | --- | --- |
|  |  | Work financed from (state source(s)): |
| \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ |  | UNIT............................................................................. |
| Name and surname |  |  |
| \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ ­­\_    I\_I\_I-I\_I\_I\_I \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ |  | COST CENTRE.............................................................  OBJECTIVE................................................................... |
| Address |  |  |
| \_ \_ /\_ \_ \_ \_ \_ \_ \_ \_ /\_ \_ \_ \_ /\_ \_ \_ \_ /\_ \_ \_ \_ /\_ \_ \_ \_ |  | SOURCE OF FINANCE................................................. |
| Bank account |  |  |

PESEL / NIP.................................................................. ............................................................

as in the statement in the contract Signature of fund administrator

**INVOICE TO CONTRACT No ……………………………………**

for Uniwersytet im. Adama Mickiewicza in Poznań for work stipulated in *Umowa zlecenia / Umowa o dzieło / transfer of economic copyrights / development of computer program and transfer of economic copyrights*1 (Contract No ………… of …………………(*date*): …………………………………………………………….............................................................

………………………………………………………………………………………..… (*work details*)

amount: PLN ………………….. (in words: ………………………..................…………. zloty).

I hereby certify that **I am / I am[[1]](#footnote-1)** not eligible for copyrights.

Pursuant to Article 65 of the Copyrights and Related Rights Act I transfer my copyrights to the work.[[2]](#footnote-2)

I certify that the information in the contract and in the statement appended to the contract/submitted to my employer has not changed.

Poznań, this ……… day of ….…………, ………. ……..…………………………………………

Signature

Work completed as agreed.

Checked and approved: Checked formally:

………………………………………………………………… …………………………………………………………………..

UAM: stamp and signature Project Administrator/Leader

**Approved for payment:**

Gross amount: ………………………………….. ............………………....……………………

Bursar

|  |  |  |
| --- | --- | --- |
| Revenue earning costs |  | Net amount:  PLN ……………………………  ……………………………………  Head, Salaries and Scholarships |
| Advance tax |  |
| Social security | |
| - paid by employee |  |
| - paid by employer + Labour Fund |  |
| Health insurance |  |
| Verified and approved  …………………… …………………………………………………………  Date Signature | |

1. Underline the applicable [↑](#footnote-ref-1)
2. If the invoice is for work as understood in the Act on Copyrights and Related Rights [↑](#footnote-ref-2)