

First Level control report

To be filled in by the first level controller.

The control report is an integral part of the documentation that needs to be filled in by the first level controllers. The control report must be sent to the Romanian/Bulgarian beneficiary, **in the original copy**, so that the beneficiary can attach it to his reimbursement application.

While carrying out the control, the controllers also fill in a detailed checklist, according to the national legislation.

I. Project Code:	(automatic by system)							
Title of the Project:	(automatic by system)							
Approved duration of the project	dd	mm	yy	-	dd	mm	yy	(automatic by system)
Project beneficiary	(automatic by system)							
Request Number:	(automatic by system)							
Reference Period:	dd	mm	yy	-	dd	mm	yy	(automatic by system)

The controls were carried out on the spot and in the desk control

Reception date for the request of the first level control asked by the Beneficiary

dd	mm	yy
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 Infoeur exchange rate =if(vlookup())

II. Table of the requested expenditures for the current reporting period

Budget line/Cost items	Requested amount (EUR)	Validated amount (EUR)	Ineligible costs
1.Project preparation	10.00 EUR	7.00 EUR	3.00 EUR
2.Travel and Accomodation			0.00 EUR
3.External expertise and service (out of which project management)			0.00 EUR
Project management			0.00 EUR
4.Equipment			0.00 EUR
5.Infrastructure and works			0.00 EUR
6.Staff costs			0.00 EUR
7.Office and administrative expenditures			0.00 EUR
Total	10.00 EUR	0.00 EUR	3.00 EUR

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Observations regarding the deductions for the current reporting period/Other remarks(if needed)

Budget line/Cost items	Explanations for ineligible expenditures/Other observations even if no expenditures were considered ineligible(if needed)
1. Project preparation	Justifications/ explanations for cost deductions by budgetlines in case ineligible costs are detected and other relevant observations and remarks even when no deductions are actually needed. Please provide reference to the breached EC regulation(s), Programme rule(s) or national legislation.
2. Travel and Accomodation	(input text)
3. External expertise and service (out of which project management)	(input text)
Project management	(input text)
4. Equipment	(input text)
5. Infrastructure and works	(input text)
6. Staff costs	(input text)
7. Office and administrative expenditures	(input text)

(To be filled only by BG FLC)

Fill the table in, if a financial correction/s is applied (in case of several financial corrections related to different tender procedures a separate table for each individual procedure should be filled in)

Name of the procedure:

Type of the procedure:

Contractor:

Budget line/s:

Value of the contract following the procurement procedure: EUR

Title of finding/s and legal basis of the finding:

Proposed financial correction to be applied to the contract in %:

The unduly paid amount that need to be recovered at the level of the entire contract: EUR

The value of the expenditures related to the contract, declared by the beneficiary in the reimbursement claim: EUR

The unduly paid amount that need to be recovered at the level of the expenditures, declared by the beneficiary in the reimbursement claim: EUR

III. The total verified expenditures of the beneficiary/lead beneficiary

The total expenditures requested for the current reporting period

The total expenditures considered ineligible for the current reporting period

The total expenditures validated for the current reporting period

(total beneficiary)

(total FLC)

(total FLC)

#VALUE!

IV. Summary table of the execution of the project

Budget line/Cost items	Approved budget	Previously validated costs	Validated costs for the current reporting period	Final balance
1. Project preparation			by FLC	#VALUE!
2. Travel and Accomodation				0.00 EUR
3. External expertise and service (out of which project management)				0.00 EUR
Project management				0.00 EUR
4. Equipment				0.00 EUR
5. Infrastructure and works				0.00 EUR
6. Staff costs				0.00 EUR
7. Office and administrative expenditures				0.00 EUR
8.Net income	0.00 EUR			
Total	0.00 EUR	7.00 EUR	0.00 EUR	#VALUE!

V. Information regarding the ERDF co-financing and the national public contribution for the current reporting period

(The beneficiary shall request for reimbursement only the amount representing the ERDF contribution and national public co-financing)

Validated amount	ERDF co-financing	National public co-financing	National private co-financing
1.00 EUR	0.75 EUR	0.00 EUR	0.00 EUR

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VI. Compliance with the European Union rules

Has the beneficiary respected the EU "horizontal objectives" related to the promotion of equal opportunities and environmental protection?

Has the beneficiary respected the rules on state aid?

Has the beneficiary respected the information and publicity requirements?

(by FLC :YES/NO)

(by FLC :YES/NO)

(by FLC :YES/NO)

VII. Aspects regarding the VAT

Does the beneficiary declare the VAT?

Is the VAT amount not recoverable under national VAT legislation?

Is the beneficiary a taxable person as defined in the art.9 of the sixth Directive?

YES/NO

YES/NO

YES/NO

Conclusions regarding the system reliability and warranty regarding the absence of false expenditure statement.

VIII.

Please include any information regarding the ascertainties / unsolved problems from the prior report/s and the measures that need to be taken as well. The conclusions regarding the efficiency of these measures must also be mentioned. Also, make observations regarding the other eligibility rules(e.g. measures to avoid conflict of interest and/or double financing, deduction of the recoverable VAT, fines, penalties etc, activities carried out in line with the approved application)

(input text by FLC)

IX. Recommendations / measures / proposals for correction of the findings that need to be followed for the next reporting period.

In case of any findings, please state your recommendations or corrective measures to be taken.-(input text by FLC)

Beneficiary(if applicable)

Date	<table><tr><td>dd</td><td>mm</td><td>yy</td></tr></table>	dd	mm	yy	Place	<table><tr><td></td></tr></table>	
dd	mm	yy					
First and Last Name	<table><tr><td></td></tr></table>		Signature and stamp (if applicable)	<table><tr><td></td></tr></table>			
Position	<table><tr><td></td></tr></table>						
Organization	<table><tr><td></td></tr></table>						

Applicable for Romanian First Level controllers

First level controllers that carried out the control

Date	<table><tr><td>dd</td><td>mm</td><td>yy</td></tr></table>	dd	mm	yy	Place	<table><tr><td></td></tr></table>	
dd	mm	yy					
First and Last Name	<table><tr><td></td></tr></table>		Signature (if applicable)	<table><tr><td></td></tr></table>			
First and Last Name	<table><tr><td></td></tr></table>		Signature (if applicable)	<table><tr><td></td></tr></table>			

Head of The First Level Control Unit

Date	<table><tr><td>dd</td><td>mm</td><td>yy</td></tr></table>	dd	mm	yy	Place	<table><tr><td></td></tr></table>	
dd	mm	yy					
First and Last Name	<table><tr><td></td></tr></table>		Signature and stamp (if applicable)	<table><tr><td></td></tr></table>			
Organisation	<table><tr><td></td></tr></table>						

Applicable for Bulgarian First Level controllers

First level controller (financial expert) that carried out the control

Date	<table><tr><td>dd</td><td>mm</td><td>yy</td></tr></table>	dd	mm	yy	Place	<table><tr><td></td></tr></table>	
dd	mm	yy					
First and Last Name	<table><tr><td></td></tr></table>		Signature (if applicable)	<table><tr><td></td></tr></table>			
First and Last Name	<table><tr><td></td></tr></table>		Signature (if applicable)	<table><tr><td></td></tr></table>			

First level controller (legal expert) that carried out the control

Date	<table><tr><td>dd</td><td>mm</td><td>yy</td></tr></table>	dd	mm	yy	Place	<table><tr><td></td></tr></table>	
dd	mm	yy					
First and Last Name	<table><tr><td></td></tr></table>		Signature and stamp (if applicable)	<table><tr><td></td></tr></table>			
Organisation	<table><tr><td></td></tr></table>						

First level controller (construction expert) that carried out the control (if applicable)

Date	<table><tr><td>dd</td><td>mm</td><td>yy</td></tr></table>	dd	mm	yy	Place	<table><tr><td></td></tr></table>	
dd	mm	yy					
First and Last Name	<table><tr><td></td></tr></table>		Signature and stamp (if applicable)	<table><tr><td></td></tr></table>			
Organisation	<table><tr><td></td></tr></table>						

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Comment: Admin:

Admin:

casuta asta se completeaza manual de CPN si e scazuta din total.

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Comment: Cristina Colodeiciu:

Este util sa se completeze o lista a procedurilor de achizitie din respectiva CR