## Letterhead of the External Auditor organization

I the undersigned (name, address, telephone and fax nu	·
as legal representative of the following organization	eficiary)
I hereby agree/(fulfill) to the terms set by the ENI Implem with the national requirements – and I confirm to meet the	
☐ The Auditor and/or the firm is a member of Leaccountants (LACPA) which in turn is member Accountants (IFAC).	
I acknowledge that untruthful/false declarations, in addition request of refunding unduly received contribution chaprosecuted under the penal code.	
Place and Date	Name
	Signature and Stamp