

Declaration on a person working exclusively on a H2020 action

Action			
Title of the action (acronym)		Grant Agreement number	

Beneficiary's/linked third party's name	
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Reporting period covered by this declaration ¹		
Reporting period number	from (date)	to (date)

This document certifies that.....² has worked for the beneficiary/linked third party exclusively on the above-mentioned H2020 action during (chosed on below):

- the whole reporting period
- from³ until⁴

(This period must cover at least one full natural month)⁵

Short description on the activities carried out during the period covered by this declaration	
Reference (e.g. work package)	Activities

SIGNATURES

For the beneficiary/linked third party (supervisor)

Name:

Date:

Signature:

For the person working exclusively on the action

Name:

Date:

Signature:

¹ Only one declaration can be made per reporting period for each person working in the action.

² Insert name of the person.

³ Insert date.

⁴ Insert date.

⁵ The person must keep timesheets for any hours worked for the action outside the period indicated herein.