



**FUND DEPOSIT DECLARATION AND PARTNER FOUNDATION'S PLEDGE**

*This section will be filled by the HRI Humanitarian Relief International e.V.*

Region		Country:	
Project Number:		Project Date:	
Partner Foundation:			

Dear Applicant, we are pleased to inform you that your project proposal and fund application mentioned below has been agreed to be supported by the HRI Humanitarian Relief International e.V. Board of Directors with the fund payment detailed below. These funds should be spent accordingly to the terms and conditions of the HRI Humanitarian Relief International e.V. 's Fund Agreement that you have signed.

<b>Project:</b>	<b>Amount:</b>
PROJECT FOR THE DISTRIBUTION OF MEAT DURING QURBAN 2026 IN BURKINA FASO	<b>15.150€</b>

Please enter your bank details:	
Bank Name:	CORIS BANK INTERNATIONAL
Branch Name:	
Account Number:	047190924101
Account Title:	OSEH
Swift/Bic Code:	CORIBFBF
IBAN:	BF14 8010 0104 7190 9241 0187
Intermediary Bank Name:	
Intermediary Bank Swift/Bic Code:	
Intermediary Bank Address:	

Terms and Conditions

1. You must confirm your acceptance of the terms and conditions contained in this statement by returning it after signing. We will transfer funds to your account upon receipt of the receipt document you approved.
2. The acceptance of the Fund Agreement requires the funds to be used for the purposes specified in Form 3. Regardless of the conditions, the funds cannot be used for other purposes.
3. In addition, the acceptance of the Fund Agreement requires that a final report including detailed financial records on how the funds are used must be delivered to us as soon as possible after the end of the project. The final report form and documents must be submitted in the Feedback Report Form (Form 7) that we will send, in accordance with the HRI Humanitarian Relief International e.V. Specifications.
4. In projects with installment payments, the HRI Humanitarian Relief International e.V. may request the project to be terminated from the partner institution, provided that a written statement is made.

Pledge

As the representative of the aforementioned organization, I accept the above terms and conditions on behalf of the organization.

Date: 22.04.2026

Name and Signature: SAWADOGO YACOUBA

