ANNEX 2

Certificate

Project Name: **Limerick City of Culture**

Accountant, Auditors or Director of Finance Name: _____

Acting as Accountant(s) & Registered Auditor(s) or Director of Finance for the above named project do hereby certify as follows:

1. That the attached copy invoices which are also listed in the enclosed schedule form part of the expenditure incurred and paid by Limerick City Council in relation to the above project.

2. That the expenditure relating to this claim has not been previously claimed from the Department of Arts, Heritage and the Gaeltacht

3. That the expenditure relating to this claim has not been recouped by Limerick City Council or Limerick National City of Culture 2014 Limited from:

    a. Any other source of public funding or
    b. Sales or from box-office receipts

4. I am satisfied that Department of Finance public financial procedures and EU public procurement policies have been followed in respect of the provision of the services by each supplier listed in the schedule.

5. Valid Tax Clearance Certificates have been obtained in respect of all of the paid invoices listed in the enclosed schedule.

Signed: _____
Delete as appropriate Director of Finance / auditor / management accountant

Dated the day of 2014

Stamp for Limerick City Council

Schedule of Invoices accompanying Certificate.

Invoice Date	Invoice No.	Supplier	Net Amount	VAT	Gross Amount	Category of expenditure
Totals						