**REQUEST FOR INVOICE**

**Please invoice:**

|  |  |  |
| --- | --- | --- |
| [ ]  **1.641,91 €[[1]](#footnote-1)** | [ ]  **656,76 €[[2]](#footnote-2)** | [ ]  **410,47 €[[3]](#footnote-3)** |
| [ ]  **492,57 €[[4]](#footnote-4)** | [ ]  **164,21 €[[5]](#footnote-5)** | [ ]  **164,21 €[[6]](#footnote-6)** |

**To:**

|  |  |
| --- | --- |
| **Invoice address** | **TVA:**  |
| **Sent invoice to** |  |

**For:**

|  |  |
| --- | --- |
| **Study No.** |  |
| **EudraCT No if applicable.** |  |
| **Reason of payment** | **Initial submission to EC / Amendment to EC** |
| **Name EC** | Comité d’Ethique Erasme-ULB |
| **Contact Person EC** | Mme Hélène François |
| **Name of bank holder** | Comité d’Ethique, C.U.B. Hôpital Erasme808 Route de Lennik, 1070 Bruxelles |
| **Bank Account No.** | BE98 0014 8442 9493 |
| **Communication** | CE - |

Signature requester Signature approver

1. **Remuneration for examining an application - 2025**:

 Interventional investigation protocol, Ethics Committee in charge of the single opinion. [↑](#footnote-ref-1)
2. Observational investigation protocol, Ethics Committee in charge of the single opinion. [↑](#footnote-ref-2)
3. Interventional investigation amendment, Ethics Committee in charge of the single opinion. [↑](#footnote-ref-3)
4. Interventional investigation protocol, Ethics Committee **not** in charge of the single opinion. [↑](#footnote-ref-4)
5. Observational investigation protocol, Ethics Committee **not** in charge of the single opinion. [↑](#footnote-ref-5)
6. Observational investigation amendment, Ethics Committee in charge of the single opinion. [↑](#footnote-ref-6)