

Name of mission / diplomatic representative / organization



APPLICATION FOR REFUND OF VALUE ADDED TAX
List of invoices

Date: _____ Supplement no. _____

Receipt no.	Seller's name and Business ID (Y-tunnus)	Specification of goods or services	Date of invoice and date of payment	Total value incl. VAT	VAT	To be completed by Finnish authorities
Transfer from the previous page				EUR c	EUR c	
	Name		Date of invoice	EUR c	EUR c	
	Business ID (Y-tunnus)		Date of payment			
	Name		Date of invoice	EUR c	EUR c	
	Business ID (Y-tunnus)		Date of payment			
	Name		Date of invoice	EUR c	EUR c	
	Business ID (Y-tunnus)		Date of payment			
	Name		Date of invoice	EUR c	EUR c	
	Business ID (Y-tunnus)		Date of payment			
	Name		Date of invoice	EUR c	EUR c	
	Business ID (Y-tunnus)		Date of payment			
	Name		Date of invoice	EUR c	EUR c	
	Business ID (Y-tunnus)		Date of payment			
	Name		Date of invoice	EUR c	EUR c	
	Business ID (Y-tunnus)		Date of payment			
	Name		Date of invoice	EUR c	EUR c	
	Business ID (Y-tunnus)		Date of payment			
Transfer to the next page				Total value incl. VAT EUR c	Total amount of VAT EUR c	