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**VSLDno-2023-256**

**Project INGOs payment: Preparation costs lump sum**

**Decision ground**

Payment decision based on Monitoring Committee approved budget

**Decision**

Confirmed total amount of ERDF funding approved for payment is 10 840,00 Eur.

**Information**

Turku Science Park Ltd

**Signature**

Merike Niitepõld, Managing Authority



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## Instructions for correction request

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### Instructions for correction request

#### **Right to demand for rectification**

The Lead Partner may make a written demand for rectification if dissatisfied with a resolution.

#### **Demand for rectification authority**

Authority to whom the demand for rectification is being made, street address and postal address

Regional Council of Southwest Finland / Provincial Government  
P.O. Box 273, Linnankatu 52 B  
FI-20101 TURKU

e-mail: kirjaamo@varsinais-suomi.fi

#### **Demand for rectification and its initiation**

A demand for rectification must be made within 14 days of being served the resolution. Member municipalities and their members are regarded as having received information on the resolution when the register is declared open to general view. Unless otherwise shown, the interested party is considered to have been notified of the resolution in seven days from the date the letter was sent. When using an ordinary electronical notification, the interested party is considered to have been notified of the resolution on the third day after the notice has been dispatched, unless otherwise shown.

On the basis of the act on charges levied for services by courts of law and certain judicial administration authorities (701/93), the petitioner is charged a litigation fee of 270 euros in the administrative court.

#### **Content of demand for rectification and delivery**

The demand with grounds must become evident from the demand for rectification and it must be signed by the author.

The demand for rectification must be delivered to the demand for rectification authority prior to termination of the demand for rectification period.

#### **Additional information**

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