**EXPORT PROMOTION PROGRAM COMPONENT 1**

**FORM 3**

**INDIVIDUAL PARTICIPATION AT TRADE FAIRS ABROAD**



**STATEMENT**

**on Awarded State Aid of Small Value**

**(de minimis state aid )**

**Form 3**

I declare, under penalty of perjury, that\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(name and headquarters of the business entity)

in the previous three-year fiscal period:

1. did not use State Aid of small amount(de minimis state aid aid)

2. used State Aid of small amount(de minimis state aid)1

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name of State Aid Grant | Eligible costs | Amount of State Aid Grant | State Aid Grant provider | Date of awarding State Aid Grant |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

\*Add rows if necessary

In L.S. Representative's Signature

date:

1 In case that you used State Aid in the previous three-year fiscal period it is necessary to fill in the given table..

Beograd, Kneza Miloša 12 е-mail: [sajmovi@ras.gov.rs](mailto:sajmovi@ras.gov.rs)  [www.ras.gov.rs](http://www.ras.gov.rs/)