**ANEXO V**

**JUSTIFICACION ECONÓMICA**

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| --- | --- |
| **IDENTIFICACIÓN DE LA ENTIDAD** | |
| Denominación |  |
| Siglas |  |
| **Identificación del proyecto** | |
| Nombre |  |
| **ANUALIDAD** |  |

**A) IMPORTE SUBVENCIONADO POR EL AYUNTAMIENTO DE OVIEDO. -**

**A.1) GASTOS DE PERSONAL (Relación de nóminas)**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **NOMBRE DEL/LA TRABAJADOR/A** | **CATEGORIA PROFESIONAL (PUESTO DE TRABAJO)** | **MES** | **TOTAL DEVENGADO** | | **APORTACION EMPRESARIAL** | **TOTAL NOMINA** | **% IMPUTADO** | **IMPORTE TOTAL IMPUTADO** | **TIPO GASTO (DIRECTO-INDIRECTO)** |
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|  |  |  |  | **TOTAL IMPORTE IMPUTADO** | | | |  |  |

**A.2 RELACION DE GASTOS**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Nº DE ORDEN** | **PROVEEDOR/A** | **CIF / NIF PROVEEDOR/A** | **Nº FACTURA** | **IMPORTE FACTURA** | **FECHA FACTURA** | **% IMPUTADO** | **IMPORTE IMPUTADO** | **RELACION CON EL PROYECTO (Concepto)** | **Tipo gasto (Directo-Indirecto)** |
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|  |  |  |  | **TOTAL IMPORTE IMPUTADO** | | |  |  |  |

**B) IMPORTE FINANCIADO POR LA ENTIDAD O POR OTRAS INSTITUCIONES PÚBLICAS O PRIVADAS.-**

**DECLARACIÓN RESPONSABLE DE COFINANCIACIÓN**

**A.1) GASTOS DE PERSONAL (Relación de nóminas)**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **NOMBRE DEL/LA TRABAJADOR/A** | **CATEGORÍA PROFESIONAL (PUESTO DE TRABAJO)** | **MES** | **TOTAL DEVENGADO** | **APORTACION EMPRESARIAL** | **TOTAL NÓMINA** | **% IMPUTADO** | **IMPORTE TOTAL IMPUTADO** | **ENTIDAD FINANCIADORA** | **TIPO GASTO (DIRECTO-INDIRECTO)** |
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|  |  |  |  | **TOTAL IMPORTE IMPUTADO** | | |  |  |  |

**A.2 RELACION DE GASTOS**

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Nº DE ORDEN** | **PROVEEDOR/A** | **CIF / NIF PROVEEDOR/A** | **Nº FACTURA** | **FECHA FACTURA** | **FECHA PAGO** | **% IMPUTADO** | **IMPORTE IMPUTADO** | **RELACIÓN CON EL PROYECTO (Concepto)** | **ENTIDAD FINANCIADORA** | **Tipo gasto (Directo/**  **Indirecto)** |
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|  |  |  |  | **TOTAL IMPORTE IMPUTADO** | | |  |  |  |  |

(La entidad se compromete a aportar cuantos documentos sean requeridos por el Ayuntamiento para la verificación de lo expuesto, así como cuantas inspecciones considere oportuno realizar).

D/Dª ………………………………………………………………………………………………….…….. en representación de la entidad, certifica la veracidad de todos los datos reflejados.

