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| --- |
| **To whom it may concern** |

|  |  |
| --- | --- |
| Your reference  Our reference  Email | T +49 61 96 79  F +49 61 96 79  Date |

**Project Completion Certificate**

|  |  |
| --- | --- |
| **Project**  **(incl. project no. and contract no.)** |  |
| **Lead executing Agency** |  |
| **Name of consortium members, if any** |  |
| **Country** |  |
| **Client / Origin of funds** | Please fill in, if necessary, the former enterprise e.g.: GTZ, Deutsche Gesellschaft für Technische Zusammenarbeit GmbH, or, new: GIZ, Deutsche Gesellschaft für Internationale Zusammenarbeit GmbH  Dag-Hammarskjöld-Weg 1-5  65760 Eschborn  Germany |
| **Contract value** |  |
| **Contract duration** |  |
| **Service description** |  |

This is to certify that all services have been delivered to our full satisfaction and in line with the contractual terms.

Eschborn,

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Name       Name

Position       Position