EXTRACT FROM AN AUTHENTIC INSTRUMENT IN MATTERS RELATING TO MAINTENANCE OBLIGATIONS NOT SUBJECT TO PROCEEDINGS FOR RECOGNITION OR A DECLARATION OF ENFORCEABILITY

(Article 48 of Council Regulation (EC) No 4/2009 of 18 December 2008 on jurisdiction, applicable law, recognition and enforcement of decisions and cooperation in matters relating to maintenance obligations (1))

IMPORTANT

To be issued by the competent authority in the Member State of origin

To be issued only if the authentic instrument is enforceable in the Member State of origin

Mention only information which is given in the authentic instrument or of which the competent authority has been made aware

1. Date and reference number of the authentic instrument:

The authentic instrument is recognised and enforceable in another Member State without any possibility of opposing its recognition and without the need for a declaration of enforceability (Article 48 of Regulation (EC) No 4/2009).

2. Nature of the authentic instrument

2.1.

Instrument formally drawn up or registered on:

(dd/mm/yyyy)

Agreement concluded or authenticated on:

(dd/mm/yyyy)

2.2. Competent authority:

2.2.1. Name:

2.2.2. Address

2.2.2.1. Street and number/PO box:

2.2.2.2. Place and postal code:

2.2.2.3. Member State:

Belgium	Croatia	Austria
Bulgaria	Italy	Poland
Czechia	Cyprus	Portugal
Germany	Latvia	Romania
Estonia	Lithuania	Slovenia
Ireland	Luxembourg	Slovakia
Greece	Hungary	Finland
Spain	Malta	Sweden
France	Netherlands	

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2.2.3. Tel./fax/e-mail

3. Creditor(s) (*)

3.1. Person A

- 3.1.1. Surname and given name(s):
- 3.1.2. Date (dd/mm/yyyy) and place of birth
- 3.1.3. Identity number or social security number:
- 3.1.4. Address
 - 3.1.4.1. Street and number/PO box:
 - 3.1.4.2. Place and postal code:
 - 3.1.4.3. Country:
- 3.2. Person B
 - 3.2.1. Surname and given name(s):
 - 3.2.2. Date (dd/mm/yyyy) and place of birth
 - 3.2.3. Identity number or social security number:
 - 3.2.4. Address
 - 3.2.4.1. Street and number/PO box:
 - 3.2.4.2. Place and postal code:
 - 3.2.4.3. Country:
- 3.3. Person C
 - 3.3.1. Surname and given name(s):
 - 3.3.2. Date (dd/mm/yyyy) and place of birth
 - 3.3.3. Identity number or social security number:
 - 3.3.4. Address
 - 3.3.4.1. Street and number/PO box:
 - 3.3.4.2. Place and postal code:
 - 3.3.4.3. Country:

⁽⁾ If the authentic instrument concerns more than three creditors or three debtors, attach an additional sheet.

- 4. Debtor(s) (*)
 - 4.1. Person A
 - 4.1.1. Surname and given name(s):
 - 4.1.2. Date (dd/mm/yyyy) and place of birth
 - 4.1.3. Identity number or social security number:
 - 4.1.4. Address
 - 4.1.4.1. Street and number/PO box:
 - 4.1.4.2. Place and postal code:
 - 4.1.4.3. Country:
- 4.2. Person B
 - 4.2.1. Surname and given name(s):
 - 4.2.2. Date (dd/mm/yyyy) and place of birth
 - 4.2.3. Identity number or social security number:
 - 4.2.4. Address
 - 4.2.4.1. Street and number/PO box:
 - 4.2.4.2. Place and postal code:
 - 4.2.4.3. Country:
- 4.3. Person C
 - 4.3.1. Surname and given name(s):
 - 4.3.2. Date (dd/mm/yyyy) and place of birth
 - 4.3.3. Identity number or social security number:
 - 4.3.4. Address
 - 4.3.4.1. Street and number/PO box:
 - 4.3.4.2. Place and postal code:
 - 4.3.4.3. Country:
- 5. Contents of the authentic instrument
- 5.1. Currency

Euro (EUR) Bulgarian lev (BGN) Croatian kuna (HRK)

Romanian leu (RON) Hungarian forint (HUF) krona (SEK)

Czech koruna (CZK) Polish zloty (PLN) Other (please specify):

Other (please specify ISO code):

2.2.1.1. The maintenance is to be paid	
y:	
surname and given name(s))	
0:	
surname and given name(s) of the person to whom the sum	must actually be paid)
Person for whom maintenance is owed	
surname and given name(s))	
5.2.1.2. Amount to be paid in one sum	
Period covered, where applicable:	
from date (dd/mm/yyyy) to date (dd/mm/yyyy) or event)	
Oue date:	
dd/mm/yyyy)	
Amount:	
5.2.1.3. Amount to be paid in instalments	
3.2.1.3. Allibuilt to be bald ill illstallielits	
	Amount
Maturity date (dd/mm/yyyy):	Amount:
	Amount:
	Amount:
	Amount:
	Amount:
Maturity date (dd/mm/yyyy):	Amount:
Maturity date (dd/mm/yyyy): 5.2.1.4. Sum to be paid regularly:	Amount:
Maturity date (dd/mm/yyyy): 5.2.1.4. Sum to be paid regularly: Once a week:	Amount:
Maturity date (dd/mm/yyyy): 5.2.1.4. Sum to be paid regularly: Once a week: Once a month:	Amount:
Maturity date (dd/mm/yyyy): 5.2.1.4. Sum to be paid regularly: Once a week:	Amount:
Maturity date (dd/mm/yyyy): 5.2.1.4. Sum to be paid regularly: Once a week: Once a month:	Amount:
Maturity date (dd/mm/yyyy): 5.2.1.4. Sum to be paid regularly: Once a week: Once a month:	Amount:
Maturity date (dd/mm/yyyy): 5.2.1.4. Sum to be paid regularly: Once a week: Once a month: Other (state frequency):	Amount:
Maturity date (dd/mm/yyyy): 5.2.1.4. Sum to be paid regularly: Once a week: Once a month: Other (state frequency):	Amount:
Maturity date (dd/mm/yyyy): 5.2.1.4. Sum to be paid regularly: Once a week: Once a month: Other (state frequency):	Amount:

5.2. Maintenance claim(*)

If applicable, until (date (dd/mm/yyyy) or event):

If the maintenance claim is subject to indexation, please indicate how that indexation is to be calculated:
Indexation applicable as from
(dd/mm/yyyy)
5.2.1.5. Amount due retroactively
Period covered:
to (dd/mm/yyyy)
Amount:
Form of payment:
5.2.1.6. Interest (if specified in the decision/court settlement)
If the maintenance claim is subject to interest, please indicate the rate:
Interest due as from:
(dd/mm/yyyy)
5.2.1.7. Payment in kind (please specify):
5.2.1.8 Other form of payment (please specify):
.2. Maintenance claim B 5.2.2.1. The maintenance is to be paid by:
(surname and given name(s)) to:
(surname and given name(s) of the person to whom the sum must actually be paid)

Person for whom maintenance is owed

(surname and given name(s)) 5.2.2.2. Amount to be paid in one sum Period covered, where applicable: (from date (dd/mm/yyyy) to date (dd/mm/yyyy) or event) Due date: (dd/mm/yyyy) Amount: 5.2.2.3. Amount to be paid in instalments Maturity date (dd/mm/yyyy): **Amount:** 5.2.2.4. Sum to be paid regularly: Once a week: Once a month: Other (state frequency): Amount: From: (dd/mm/yyyy) Due day/date: If applicable, until (date (dd/mm/yyyy) or event):

If the maintenance claim is subject to indexation, please indicate how that indexation is to be calculated:

Indexation applicable as from

	(dd/mm/yyyy)
	5.2.2.5. Amount due retroactively
	Period covered:
	to (dd/mm/yyyy)
	Amount:
	Amount
	Form of payment:
	5.2.2.6. Interest (if specified in the decision/court settlement)
	If the maintenance claim is subject to interest, please indicate the rate:
	Interest due as from:
	(dd/mm/yyyy)
	5.2.2.7. Payment in kind (please specify):
	5.2.2.8 Other form of payment (please specify):
	,
5.	2.3. Maintenance claim C
	5.2.3.1. The maintenance is to be paid
	by:
	(surname and given name(s))
	to:
	(surname and given name(s) of the person to whom the sum must actually be paid)
	Person for whom maintenance is owed
	(surname and given name(s))
	5.2.3.2. Amount to be paid in one sum
	Period covered, where applicable:
	(from date (dd/mm/yyyy) to date (dd/mm/yyyy) or event)
	Due date:
	(dd/mm/yyyy)

Amount:

5.2.3.3. Amount to be paid	ıın	insta	ıments
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Maturity date (dd/mm/yyyy):	Amount:
5.2.3.4. Sum to be paid regularly:	
Once a week:	
Once a month:	
Other (state frequency):	
Amount:	
From:	
(dd/mm/yyyy)	
Due day/date:	
If applicable, until (date (dd/mm/yyyy) or even	t):
If the maintenance claim is subject to indexation, calculated:	please indicate how that indexation is to be
Indexation applicable as from	
(dd/mm/yyyy)	
5.2.3.5. Amount due retroactively	
Period covered:	
to (dd/mm/yyyy)	
Amount:	
Form of payment:	

5.2.3.6. Interest (if specified in the decision/court settlement)
If the maintenance claim is subject to interest, please indicate the rate:
Interest due as from:
(dd/mm/yyyy)
5.2.3.7. Payment in kind (please specify):
5.2.3.8 Other form of payment (please specify):
5.3. Costs
The authentic instrument provides that
(surname and given name(s))
must pay the sum of:
to:
(surname and given name(s))
If additional pages have been attached, state the number of pages:
Done at:
on:
(dd/mm/yyyy)
Signature and/or stamp of the competent authority