

To the director of the Department

The undersigned _____

as _____

REQUESTS

A refund for the following material/services:

1. _____

2. _____

3. _____

This refund is necessary for : _____

Caserta, _____

THE APPLICANT

Reserved office space _____

GIVEN the aforementioned instance
HAVING CONSIDERED the need to act in this regard
HAVING REGARD TO the regulation for self-contained expenditure in force
HAVING ASSESSED the financial availability of the related budget chapter

PhD COORDINATOR

**AUTHORIZES THE REFUND
The Director of the Department**
