

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

- | | | |
|----------------------------------|------------------------------------|---|
| <input type="checkbox"/> Belgium | <input type="checkbox"/> Bulgaria | <input type="checkbox"/> Czech Republic |
| <input type="checkbox"/> Germany | <input type="checkbox"/> Estonia | <input type="checkbox"/> Ireland |
| <input type="checkbox"/> Greece | <input type="checkbox"/> Spain | <input type="checkbox"/> France |
| <input type="checkbox"/> Croatia | <input type="checkbox"/> Italy | <input type="checkbox"/> Cyprus |
| <input type="checkbox"/> Latvia | <input type="checkbox"/> Lithuania | <input type="checkbox"/> Luxembourg |
| <input type="checkbox"/> Hungary | <input type="checkbox"/> Malta | <input type="checkbox"/> Netherlands |
| <input type="checkbox"/> Austria | <input type="checkbox"/> Poland | <input type="checkbox"/> Portugal |
| <input type="checkbox"/> Romania | <input type="checkbox"/> Slovenia | <input type="checkbox"/> Slovakia |
| <input type="checkbox"/> Finland | <input type="checkbox"/> Sweden | |

2.2.3. Telephone/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:

⁽¹⁾ OJ L 7, 10.1.2009, p. 1.

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

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:

4. Debtor(s) (*)

4.1. *Person A*

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

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

- | | | |
|---|---------------------------------------|---|
| <input type="checkbox"/> euro (EUR) | <input type="checkbox"/> lev (BGN) | <input type="checkbox"/> Czech koruna (CZK) |
| <input type="checkbox"/> kuna (HRK) | <input type="checkbox"/> forint (HUF) | <input type="checkbox"/> zloty (PLN) |
| <input type="checkbox"/> Romanian leu (RON) | <input type="checkbox"/> krona (SEK) | <input type="checkbox"/> Other (please specify ISO code): |

5.2. Maintenance claim (*)

5.2.1. Maintenance claim A

5.2.1.1. 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))

5.2.1.2. Amount to be paid in one sum

Period covered, where applicable:

(from date (dd/mm/yyyy) to date (dd/mm/yyyy) or event)

Due date:

/ /

(dd/mm/yyyy)

Amount:

5.2.1.3. Amount to be paid in instalments

Due date (dd/mm/yyyy)	Amount
/ /	
/ /	
/ /	
/ /	

5.2.1.4. Sum to be paid regularly

- Once a week
 Once a month
 Other (state frequency):

Amount:

(*) If the authentic instrument concerns more than three maintenance claims, attach an additional sheet.

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)

5.2.1.5. Amount due retroactively

Period covered:

/ /

/ /

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):

5.2.2. 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

Due 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:

/ /
/ /

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 in instalments

Due 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 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)

5.2.3.5. Amount due retroactively

Period covered:

/ /

/ /

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: