Attachment No. 2.

Report on costs reimbursement payment or issue of an Award for Resident of Poland

Nb.	Fiscal year	Amount	Account number	Name	Surname	Date of birth	Pesel	Address (street)	Postal code	City	Type of the document	Number of the document	Country
1	2019												
2	2019												
3	2019												
4	2019												
5	2019												
6	2019												
7	2019												

Report on costs reimbursement payment or issue of an Award for Non-resident of Poland

Nb.	Fiscal year	Amount	Account number	Surname	First name	Father's name	Mother's name	Date of birth	Place of birth	Tax identification number	Type of the taxidentification number	Country issuing the tax identification number	Country (postal address)	City (postal address)	Postal code (postal address)	Name of the street (postal address)	House number (postal address)	Flat number (postal address)
1	2019																	
2	2019																	
3	2019																	
4	2019																	
5	2019																	