

# Ferring Innovation Grants for Racial Equality in Reproductive Medicine and Maternal Health

## Invoice and vendor creation process

### Step 1:

In order for Ferring to pay out the grant, we need to receive an invoice from your institution/organization. And in order for Ferring to pay an invoice, your institution/organization has to be created as a vendor in our system. To be created as a vendor, please do the following:

1. Fill out the new Vendor form (attached to award email)
2. Save it as a PDF
3. Send it to: [FerringDenmark.PayablesQuery@fering.com](mailto:FerringDenmark.PayablesQuery@fering.com)

**It is important** that you complete the vendor form with all required information to ease the vendor creation process.

In the vendor form, please select the currency in which you will submit the invoice after having been created as a vendor. If you select another currency than EUR, please indicate:

- The awarded amount in EUR (stated in your Grant Award Agreement)
- The exchange rate used to convert to your chosen currency
- The amount in your chosen currency

Should your currency not be on the drop-down list in the vendor form, please contact us.

### Step 2:

Create an invoice according to the guidelines below. The information on the invoice must match the information submitted in the vendor form; including the currency in which you will submit the invoice.

Please send the invoice to: [FerringDenmark.InvoiceSubmission@fering.com](mailto:FerringDenmark.InvoiceSubmission@fering.com)

**Please Note:** When you send the invoice, it is important that you only attach one document to your email - otherwise the system will not accept it. In case you need to send us several documents, please scan the invoice and the additional documents, so that the invoice and additional pages are all within one file.

Please make sure that the invoice **is in English** and **contains all required information** listed below in order to have the invoice processed in our system:

- Logo of your institution/organization
- Name and address of your institution/organization
- VAT number of your institution/organization (if available)
- Ferring's name and address:  
**Ferring Pharmaceuticals A/S, Kay Fiskers Plads 11, 2300 Copenhagen S, Denmark**
- Ferring's VAT number: **DK16313440**

- Ferring's contact person: **Attn: Lenka Zemanova**
- A unique Invoice Number
- The Date of invoicing
- A short description of services:  
Please write: **[Title of your project] - Ferring Innovation Grants for Racial Equality in Reproductive Medicine and Maternal Health)**
- Amount (according to signed Grant Award Agreement)
- Currency (please see the guideline for currencies under step 1)
- Payment terms: **30 days net**
- Bank account details, incl. IBAN and Swift Code. Note! The information on the address and the banking details need to match the information in the Vendor Form.

In case you have requests related to the payment status of your invoice please send your request to and refer to your invoice number: [FerringDenmark.PayablesQuery@ferring.com](mailto:FerringDenmark.PayablesQuery@ferring.com)