

Form describing your Organization Chart

Name		<u></u>
Legal s	tatus:	
☐ Fo	undation	☐ Other
Date o	f establishment	_ (day/month/year)
Addres	S	
Phone	Number (with country and area code)	
Email a	ddress	
Name of president of association		
Phone	Number	
Email address		
Primar	y Activities	
Attach		
1.	Articles of Association	
2.	Bylaws	
3.	Balance Sheets of the past two years	
4.	Governance at date(President, Board Members, Auditors etc.)	
5.	Report on the main activities run the last 2 years and indication how you hove found out about the Pediatric hospital of Kimbondo.	

HUB FOR KIMBONDO- Coordinator for the Fondazione Pediatrica od Kimbondo

Legal location: via Ildebrando della Giovanna 63/1-00166 Roma-CF:97715140584

 $Secretary: phone \ n^{\circ} + 390666180276 - \underline{info@hubforkimbondo.it} - \underline{www.hubforkimbondo.it}$