

## DECLARATION on similar experience

1. Name and subject of the contract: **KBC Rijeka Phase 3**
2. Number and date of the contract: AA-010063-00 – 07.12.2020
3. Name of beneficiary: **KBC (KLINIČKI BOLNIČKI CENTAR) RIJEKA (CLINICAL HOSPITAL CENTER RIJEKA)**
4. Address of beneficiary: **Vjekoslava Dukića 7 51 000 Rijeka, Hrvatska**
5. Country: **Republic of Croatia**
6. The capacity in which he participated in the fulfillment of the contract  
(note the appropriate option)

**a) general contractor (association leader)**

~~b) Associate Contractor~~

~~c) Subcontractor~~

7. Contract Value	expressed in the currency of in which concluded the contract	Expressed in equivalent US dollars
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a) initial (on the date of signing the contract) **EUR 859,534**

**USD 881,022**

b) final (at the end of the contract)	<b>EUR 859,534</b>
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**USD 881,022**

8. If there were disputes regarding the performance of the contract, their nature and their manner of settlement: **n/a**

9. Execution period (months)

a) Contracted: **12 months**

b) Actually carried out: **29 months**

c) The reason for the postponement of the contracted term (if applicable), which will be supported on the basis of addenda concluded with beneficiary: **The client had a delay in accessing the fund from EIB.**

10. Number and date of the reception report: **Certificate of service contract completion dated 17.12.2024 with ID: OPS/AS/PIFA/2024-17149/TT/aq**

11. The main remedies and additions recorded in the reception minutes (the certificate of completion): **n/a**

12. Other relevant aspects by which the bidder supports its similar experience, with particular reference to areas or physical volumes of the main capacities and categories of works provided for in the contracts: **Confirmation for payment for the AA-010063-001 KBC Rijeka Phase 3 dated 22.01.2025**

Completion date: **22.01.2025**

Signed:

Name: **Stefano Ferrari**

Position within the company: **Chief Executive Officer**

Company name: **management4health AG**