|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| COSTS | | | | |
| **Purpose of the service covered by the cost** | | **Charged by** | **Name of the authority, body or person** | **Amount4**  **[currency]** |
| Administrative application fee5 | | CAN | Ministry of justice | BGN 50 |
| Administrative processing fee6 | | N/A |  |  |
| Court fees | | CT | Sofia City Court | BGN 25 |
| Visa(s) for PAPs to enter the State of origin | | N/A |  |  |
| Specialised professionals | Legal services (*e.g.,* legal advice and representation in the State of origin) | OP | Lawyer | BGN 150-2800 |
| Notary’s fees | OP | Notary | BGN 150 |
| Medical services (*e.g.*, health examination for the child) | OP | Medical specialist | BGN 50 per visit |
| Psychologists / counselling | OP | Specialist | BGN 50 per visit |
| Interpreter in the State of origin | OP | Specialist Interpreter | BGN 1000 |
| Other: [please specify] | N/A |  |  |
| Documentation | Birth certificate(s) of the child | PA | Municipality of Sofia | BGN 45 |
| Passport from the State of origin | PA | Ministry of interior affairs | BGN 20 |
| Legalisation of documents in the State of origin | PA | Ministry of foreign affairs | BGN 110 |
| Translation of documents in the State of origin | OP | Specialist interpreter | BGN 1500 |
| Other: [please specify] | N/A |  |  |
| Other costs charged by an AB of the State of origin (not included in other categories)  [please specify] | | N/A |  |  |
| Emigration / Exit fees for the child (*e.g.*, fee to exit the State)11 | | N/A |  |  |
| Other: Administrative costs | | Administrative costs | AAB | BGN 1070-1920 |

|  |  |  |  |
| --- | --- | --- | --- |
| **CONTRIBUTIONS** | | | |
| **Purpose** | **Charged by** | **Name of the authority, body or person** | **Amount**  **[currency]** |
| Contributions demanded by the State of origin  [Please specify for what purpose this money is collected] | N/A |  |  |
| Contributions demanded by an accredited body of the State of origin  [Please specify for what purpose this money is collected (*e.g.* for the care of the child)] | N/A |  |  |

|  |  |
| --- | --- |
| **TRAVEL REQUIREMENTS** | |
| [Please specify if prospective adoptive parent(s) is / are required to personally travel to the State of origin and the number of compulsory trips12 as well as the minimum number of days which he / she / they are required to stay in the State of origin]. | PAP are required to visit the adoptee and stay with him/her for at least 5 consecutive days |

4 For each category of costs, please indicate the currency, fixed amount, if applicable, or the range (minimum to maximum) that is charged for each category. See also p. 2 of this document for more details on the way to enter the “amount” in the tables.

5 States should use this category to indicate whether they charge a standard fee when PAPs submit an application to adopt.

6 States should use this category to indicate whether they charge subsequent fees at different stages of the adoption procedure (*e.g.,* when the matching is done).

7 Only applicable if not included already in the costs for services by a receiving States accredited body mentioned in Table II.

8 *Ibid*.

9 *Ibid*.

10 *Ibid*.

11 This category of costs does not refer to costs associated with the immigration of the child *into* the receiving State; instead, it refers to any fees charged by the authorities of the State of origin in order for the child to *exit* the territory.

12 States should be aware of the psychological trauma to the child which could occur when several trips are made to meet the child before he or she is finally entrusted to the adoptive parents.