

DOCUMENT: ED-00.01 - FACTS BASE  
DOSSIER: Position Recovery & Fact Base  
STATUS: FILL-IN TEMPLATE (FACTUAL, NO INTERPRETATION)

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### 1. PURPOSE OF THIS DOCUMENT

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This document records only verifiable facts to form a neutral factual basis prior to escalation, position taking or handover.  
The document contains no interpretation, judgment, attribution of motive legal qualification or recommendation.

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### 2. RULES OF USE (HARD)

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- Include only demonstrably established facts.
  - Each fact is traceable to at least one primary source.
  - No assumptions, interpretation or standardisation.
  - No cause-and-effect language.
  - Uncertain or not verifiable = do not include.
  - Only include facts if relevant to file purpose.
- =====

### 3. FILE IDENTIFICATION

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File code:  
ED-00  
File name:  
Position Recovery & Fact Base  
Compilation date:  
Version:  
Compiler:  
Context (factual, max 1 sentence):  
[ ] e.g. "Factual basis prepared for internal filing and transfer."

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### 4. PARTIES & ROLES (FACTUAL)

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#### 4.1 Party A

Name:  
Organisation:  
Contact person:  
Role/function (actual):

#### 4.2 Party B

Name:  
Organisation:

Contact person:  
Role/function (actual):

#### 4.3 Other stakeholders (if applicable)

Name:  
Organisation:  
Role:  
Source ID involvement:

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### 5. RESOURCE REGISTER (PRIMARY)

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Source ID format (mandatory):  
[B-YYYY-###  
[ ] B-XXXX-XXX]

Source type:  
Date source:  
Sender/owner:  
Recipient(s):  
Title / subject:  
File name exact:  
Location / path:  
Hash / proof unchanged (optional):  
Comment (actual, max 1 sentence):

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## 6. REGISTER OF FACTS (CHRONOLOGICAL)

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Only include facts with existing primary source.

FACT 00-01]

Date:

Time (if known):

Type of fact:

appointment recorded

communication sent

communication received

delivery / completion

[Change confirmed

[payment / invoicing

[Decision recorded

[access / rights

transfer act

other, namely:

Party/parties involved:

Description fact (max 3 sentences, factual):

Source ID(s):

Source location:

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FACT 00-02]

(repeat if necessary)

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## 7. COMMUNICATION OVERVIEW (OPTIONAL)

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Index only; no content.

Date:

Channel:

Direction:

Subject/title:

FACT ID:

Source ID:

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## 8. DELIVERIES & ARTEFACTS

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Only demonstrably transferred items.

Name artefact:

Type:

Date of completion:

Description (factual, max 2 sentences):

Source ID(s):

Location / URL:

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## 9. PAYMENT AND INVOICE REGISTER

=====  
Type:  
Date:  
Amount:  
Currency:  
Reference:  
Source ID:  
Source location:  
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10. MISSING SOURCES (CHECKLIST)  
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Only include if explicitly mentioned in existing source.  
What is missing:  
Literal reference:  
Source ID:  
Action:  
Status:  
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11. VERIFICATION & CONSISTENCY CHECK  
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Each fact has at least one primary Source ID.  
 All Source IDs exist in section 5.  
 Chronology is consistent.  
 No interpretive or normative language.  
 No cause-and-effect language.  
 No duplicates.  
Check performed by:  
Name:  
Date:  
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12. SLOT  
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This fact base serves solely as a neutral underlay for further documents on position, obligations and decisions. Independent use or interpretation is excluded.  
END OF DOCUMENT