|  |  |
| --- | --- |
| C:\Users\Amalia\Google Drive\EULAST\Eulast_logo.jpg | **Reimbursement form Travel Expenses – EULAST-II**  |

|  |  |
| --- | --- |
| **Name account holder** |  |
| **Initials** |  |
| **Address** |  |
| **Postal Code** |  |
| **City** |  |
| **Country** |  |
| **IBAN number\*** |  |
| **SWIFT code\*** |  |

\*both are required for international financial transactions

**Travel costs**

|  |  |
| --- | --- |
| **Date of meeting** |  |
| **Flight** | €  |
| **Hotel** | € |
| **Other** | € |

|  |  |
| --- | --- |
| **Total costs** | €  |

|  |  |
| --- | --- |
| **Date:** | **Signature:** |

**Please send this form, including all invoices to:**

**egrisfoundation@outlook.com**