Reimbursement Form



Name of Event:	
Participant:	
Home address:	
Date of Birth:	German tax ID (if available):
Bank account	
IBAN: BIC/SWIFT:	
Name of Bank:	Registered Office:
I hereby request reimbursement from cost centre no. 402520 of the incurred expenses below (please enclose original receipts)	
Transport expenses for the trip to Passau from	and return to:
with train/ airplane/ private car (k	m à €0.25) EURO
Accommodation costs:	EURO
Other travel costs e.g. taxi, bus: (Taxi expenses carreimbursed upon presentation of valid reasons. Please e below)	·
Speaker fee:	EURO
Amount to be reimbursed: I confirm that the above information is correct and that the costs claimed will not be or have not been submitted to third parties for reimbursement.	
Location, date To be completed by PICAIS only:	Participant's signature
Substantively and arithmetically correct	
Passau, the	PICAIS General Manager

Please enclose reason for other travel cost, e.g. taxi, if applicable: