

Reimbursement Form

**Please use the form specially issued by
the COST Office for the specific
meeting.**

Sample below



Reimbursement of Travel Expenses for COST meetings

M F
 Family Name Forename Gender (for stat.purpose)

Home address:
 Street & N° Code Town

Country Tel Fax e-mail
(abbr.)

Institution or affiliation :
 Name Address

① For payment, please fill in all details of your bank account

Name of Account Holder : (*)
 COST Ref N°

Street & N° Post Code Town Country (abbr.)

Bank Details :
 Name of bank or postal account Branch and address unless IBAN+SWIFT given

Bank account N° - **IBAN** (Imperative for € zone) ** Bank Code - **BIC** or **SWIFT** (Imperative for € zone) **

Purpose of travel COST Action : **F2** Meeting : (*)
 Meeting :
 Town Country Dates COST Meeting Ref N°

Travel :	From	To	Travel	Date	Hour
Town			Start		
			End		

Travel, accomodation and other expenses (please see the "Rules for reimbursement of expenses")

1) Transport	Amount	Currency (use currency of ticket)
air ticket Apex : <input type="radio"/> YES <input type="radio"/> NO		
train		
car total Km (both ways) :		
other :		

2) Accommodation (Please indicate the number of nights paid by yourself and necessary for meeting or APEX)

Number of nights :

3) Meals (Please indicate **date** only for meals paid by yourself)

Lunch :					
Dinner :					
Total N° :					

I declare that the expenses claimed above are not being reimbursed from any other source :

Date Signature

For COST Office use:

Date Signature