

Travel Expenses Reimbursement Form

Dear Sir / Madam

In order to claim reimbursement of travel expenses related to your participation in the expert seminar “CEE Fundraising 2024. Sharing experience” please complete the form and return it to our office. Please notice, that costs of local transportation to/from the railway station, bus station, or airport will be not reimbursed.

Name of the participant	
Organization	

DEPARTURE			ARRIVAL			Means of transport	Travel expenses according to receipts/tickets (amount and currency)
City	Date	Time	City	Date	Time		
TOTAL AMOUNT							

In case of currencies not processed by the bank of the Organizer, costs will be converted by the Organizer into EUR

Do not fill this table	Exchange rate	Amount in EUR
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Wire transfer information

Name of the bank account holder/owner	
Residence address of the bank account holder (street, city with a zip code, country)	
Bank name	
Bank account number (IBAN, with a two-letter country code)	
BIC/SWIFT	

DD.MM.2024 (Date)	(Participant’s signature)
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### **Attachments**

I hereby submit the following receipts/copies of the tickets:

- 1)
- 2)
- 3)
- 4)

**Additional information** (if needed)