**Travel expenses claim and reimbursement form / Erstattungsantrag**

**Reimbursement:**

I hereby request reimbursement for expenses (see attachments) which were incurred in connection with my above stated travel to \_\_\_\_\_

Full Name

Complete Home Address

= c/o (if applicable), Street + No, Postcode + City

IBAN

BIC/SWIFT

Date:

My original signature (no scans!): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*M&B Office Only!*

Project number: 8713 / PSP S.90158.00.510100

Amount granted:       €

Approval Managing Director: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_

**Full Name**: \_\_\_\_\_

**Destination**: \_\_\_\_\_

**Conference / workshop activities**

Start - Date / Time: \_\_\_\_\_

End - Date / Time: \_\_\_\_\_

**Outward journey:**

Travel from:  home address (place of residence)  office

Date / Time of departure: \_\_\_\_\_

Travel by:  flight  train

Travel to:  place of conference/workshop  hotel  Airbnb

Date / Time of arrival: \_\_\_\_\_

**Vacation**:

I combined the conference / workshop travel with private vacation:  yes  no

If yes, please list each day of travel between departure for the conference and your return home in a chronological order and state whether it was a travel, conference or vacation day. Please attach the list to your travel expenses claim.

**Return journey:**

Travel from:  place of conference / workshop  hotel  Airbnb

Date / Time: \_\_\_\_\_

Travel by:  flight  train

Travel to:  office  home address (place of residence)

Date / Time of arrival: \_\_\_\_\_

**Accommodation**:

I stayed in shared accommodation:  yes  no

**If NO**, please attach the hotel invoice. Make sure that hotel invoices are issued to your name followed by Berlin School of Mind and Brain, Humboldt-Universität zu Berlin, 10099 Berlin.

In case of Airbnb, the invoice has to be issued to your private home address (place of residence).

**If YES**, please fill in the person(s) you shared the accommodation facility with, add the exact costs for each person in €\* (i.e., person XYZ (XYZ €)) and then choose the applicable option:

The person/s is/are: *name, first name (XYZ €)*

I paid the entire amount and apply for reimbursement of my partial accommodation costs as person *name, first name* has already paid his/her partial costs. (Please attach invoice and bank statement of your money transfer)

Someone else paid and I have settled my share amount to person *name, first name* and apply for reimbursement of my partial accommodation costs. (Please attach copy of invoice stating the full amount and bank statement of your money transfer to the person stated above)

Other (Please describe the situation and attach relevant documents, invoices and bank statements): *describe situation here*

*\* In case of foreign currency invoices, please provide a print statement of the exact amount in €. Use the currency converter OANDA (https://www.oanda.com/lang/de/currency/converter/) inserting the date of the invoice for conversion into €.*

**Third-Party Payments (for costs other than accommodation)**:

Some payments for my trip were made by other people:  yes  no

**If YES**, please fill in the person(s) who issued prior payments:

The person/s is/are: *name, first name*

Please also list the item (e.g. conference fee, etc.) the third party paid for and the amount in €\* and then choose the applicable option:

List: *XYZ (XYZ €)*

I have repaid the entire amount to person(s) *name, first name* and apply for full reimbursement of according costs. (Please attach invoice and bank statements of your money transfer)

Other (Please describe the situation and attach relevant according documents, invoices and bank statements): *describe situation here*

*\* In case of foreign currency invoices, please provide a print statement of the exact amount in €. Use the currency converter OANDA (https://www.oanda.com/lang/de/currency/converter/) inserting the date of the invoice for conversion into €.*

**List of attachments: Please number each attachment (top right hand corner, not stapled) and hand it in in the following order (smaller tickets and receipts need to be taped on a blank A4 sheets):**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| # | Date | Attached | not neccessary | checked by M&B |
| 1 | Conference/workshop overview (stating date, time, place and venue) |  |  |  |
| 2 | Part of program of conference/workshop stating your participation |  |  |  |
| 3 | Confirmation of attendance |  |  |  |
| 4 | Your presentation (e.g. print of first slide of PPT, poster, 500wd report) |  |  |  |
| 5 | List of travel, conference/workshop and vacation days in chronological order |  |  |  |
| 6 | Accommodation documents (invoice, bank statements, list of persons, OANDA\*) |  |  |  |
| 7 | Third-party payment documents (e.g. specifications, bank statements, OANDA\*) |  |  |  |
| 8 | Travel documents (e.g. tickets, boarding passes, etc. OANDA\*) |  |  |  |
| 9 | Further expenses (conference fees, etc., OANDA\*) |  |  |  |
| 10 | Print of IBAN verification  (https://www.iban-rechner.de/iban\_validieren.html) |  |  |  |

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**List of expenses in €:**

Please fill in the list of reimbursable expenses incurred. Add the number of the document according to the above list of attachments.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| # | Date | Receipt for | Total in € | Necessary explanation |
|  |  | Accommodation |  |  |
|  |  | Ticket |  |  |
|  |  | Fees |  |  |
|  |  | … |  |  |

I hereby confirm that the specifications and attachments I have supplied are complete and correct.

Date / Place \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ My original signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_