

Surname, first name:		Department:	
		Bank:	
Destination (address) and, where necessary, (country) of trip:		IBAN:	
		BIC / SWIFT:	

Trip schedule		Explanation / Examples:
Start of trip (date, time, place of departure):		Departure from private flat, university etc.
Start of official business (date, time):		Start of conference, rehearsal, performance etc.
End of official business (date, time):		End of conference, rehearsal, performance etc.
End of trip (date, time, place of arrival):		Arrival at private flat, university etc.
Where necessary, observations on trip schedule:		Several items of official business successively, several changes of place, routes not the most direct possible
If private overnight stay was integrated into trip: from when to when?		Following end of conference
Only in case of trips abroad:		private overnight stays in locality
When was the border crossed on the outward journey (date, time)?		In case of flights, landing time abroad
When was the border crossed on the return journey (date, time)?		In case of flights, landing time in Germany

Arrival and departure, transfers, public transport during journey				The following are recognised (to be completed by SC H):
Means of transport	Cost in € or, by car, kilometres travelled:	Where relevant, foreign currency	Route from ... to ..., observations if necessary	

Used on this journey were: ☐ BC 25 ☐ BC 50 ☐ BC 100 ☐ Jobticket ☐ Deutschland-Ticket ☐ other:

☐ own car ☐ I was a passenger ☐ rental car ☐ university car ☐ other:

☐ I took someone as a passenger: (name) on the route

☐ The cost of my train ticket/flight was reimbursed/paid for by the following third party:

If a rental car or taxi was used, please provide reason(s). Where several journeys were made, please allocate reason(s) to journey(s):

☐ because the place of business was not otherwise accessible

☐ because other modes of transport would have been more expensive

☐ professionally necessary journeys between 10 pm and 6 am

☐ because valuable / fragile / cumbersome luggage had to be transported, specifically:

☐ health reasons: known to personnel department, or as follows:

☐ Other:

Please also fill in the second page.

Overnight accommodation			
Date / Period of time	Cost in € or private accommodation	Where relevant, foreign currency	Name of hotel / accommodation / private

O My accommodation costs were reimbursed / paid for by the following third party:

The following are recognised (to be completed by SC H):

If the hotel costs are more than €75.60 per night (incl. breakfast), please provide reason(s):

O It was a conference hotel and the other participants were accommodated there too.

O At place of business and in locality there were no cheaper hotels available at that time despite an intensive search, e.g. trade fair in progress.

O Other:

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Meals

Were cost-free meals offered during the journey/flight? Put a cross where appropriate (must be a hot, nutritious meal including a drink).

Outward journey: O Early O Lunchtime O Evening

Return journey: O Early O Lunchtime O Evening

Other: O Early O Lunchtime O Evening

Was breakfast included in the price of the hotel? O Yes, for every night stayed O No

O On the following days:

Were cost-free meals offered during your stay by the event organiser or by third parties?

Breakfast: O Yes, every day O No O On the following days:

Lunchtime: O Yes, every day O No O On the following days:

Evening: O Yes, every day O No O On the following days:

Calculation of daily allowance (to be completed by SC H):

Only in the case of journeys abroad: Did you eat lunch in a canteen or a student refectory?

O Yes O No

Explanations (where necessary):

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Ancillary costs			
Type of cost (entrance fees, participation fees, filling up with petrol, parking charges etc.)	Cost in €	Where relevant, foreign currency	Observations or reason(s)

The following are recognised (to be completed by SC H):

Further general observations on trip:

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Total

where appropriate, university subsidy

minus advance

Sum to be paid

Did I receive an advance payment for this journey? O No O Yes

(Statement of costs to be submitted within 14 days)

I ensure that the information I have provided is factually correct and complete.

The expenses I am claiming were actually incurred by me or have already been presented to the accounts department.

The sum to be paid will be transferred into the above-mentioned bank account.

Calculation is correct:

Date / signature of person travelling

Preliminary accuracy check by university administration:

Date / signature

Date / signature SC H