



Travel Expenses Claim Form

Year:

The personal data required for reimbursement of travel expenses are stored in accordance with the state of Baden-Württemberg data protection law.

Family name, given name(s) of claimant		Job title	Work telephone
Place of work (office, institute)		Private address (street, no., postcode, town)	
Work address		Attached is the approved travel application form approved on	
I request <input type="checkbox"/> cash <input type="checkbox"/> bank transf.	IBAN	BIC	

Acct. assignment object (required) Cost center with fund OR WBS element OR internal order:			
Cost center (7 characters)	Fund (4 char.)	WBS element / project (funded program) (10 char.)	Internal order (funded program) (10 characters)
			8

Advance payments/ payments already made by the University:	€
--	---

Start of travel Date: Time: from: to:	Start of business Date: Time:	End of business Date: Time:	End of travel Date: Time: from: to:
--	--	--	--

Daily return?	<input type="checkbox"/> no	<input type="checkbox"/> yes – for each day, list start/end of business travel (below) !
----------------------	-----------------------------	--

Own total distance (km): car? <input type="checkbox"/>	Name, place of work of accompanying travelers and no. of km they traveled with you
---	---

Your expenses, receipts: (For travel outside the eurozone, please enter amounts in the relevant currency.)	<input type="checkbox"/> Train	<input type="checkbox"/> other:	
	<input type="checkbox"/> Other public transport	<input type="checkbox"/> Flight(s)	<input type="checkbox"/> Company vehicle
	<input type="checkbox"/> Taxi (receipt and explanatory statement):		
	<input type="checkbox"/> incidental expenses		
	<input type="checkbox"/> Accommodation expenses (receipt)		<input type="checkbox"/> breakfast
	Lump sum for _____ nights (private accommodation, e.g., with relatives or friends)		
Free accommodation on (date)	<input type="checkbox"/> provided by third party	<input type="checkbox"/> paid for by colleague(s)	<input type="checkbox"/> included in conference fee or similar

Reason for accommodation expenses above €80 per night:

Want per diem benefit?	<input type="checkbox"/> no	<input type="checkbox"/> yes - you must answer "benefits provided by third party" below!
-------------------------------	-----------------------------	--

Benefits provided by third party (free meals, e.g. during travel, included with accommodation)

Travel outside Germany : Place, date and time of each border crossing				Free meals provided as part of the business travel (also inflight/ incl. in conference fee) or free accommodation ?: (F=breakf.; M=midday meal; A=evening meal; Ü=accommodation) <input type="checkbox"/> None <input type="checkbox"/> Yes (specify - see below)					Did you receive a fee in connection with this travel?	
	Location	Date:	Time:	Date	F	M	A	over-night	<input type="checkbox"/> Yes (amount):	€
Outgoing					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Did you receive travel expenses (Reisebeihilfe)?	
Return journey					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Yes (amount):	€

Give details (Journey taken, daily return, date, time; on a separate sheet if needed):

I confirm that the information given on this form is correct.	Endorsement:
Date/ signature of applicant	Date/ signature of University institute or project director