



# 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 : Meeting :**

**Meeting :**     (\*)  
 Town Country Dates COST Meeting Ref N°

Travel :	From	To	Travel	Date	Hour
Town			Start		
			End		

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

1) Transport	Amount	Currency
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