Erasmus Academic Network
LISBOAN
Teaching & Researching the Lisbon Treaty

Please send this form including <u>all necessary original receipts</u> to:
TEPSA (att. Mrs. Laura Ventura)
11 Rue d'Egmont
1000 Brussels
BELGIUM

Name and Surname: _____
Address: _____
_____
Telephone: _____
Email: _____
Organisation: _____
Name of account holder: _____
(if different from above) _____
Name and address of Bank: _____
Account number: _____
S.W.I.F.T. / BIC: _____
IBAN: _____

Event: **Final Conference**

Date and Location: 6-7 June 2013, Brussels

Journey between _____ and _____

Please specify the VAT included if appropriate		Currency	Net amount	VAT	Total
Rail (attach copies):					
Air (attach copies)					
Private car (do not fill in amount):	km (total): _____ à 22 ct				
Other costs (please specify and **attach copies**)					
	FX rate *(do not fill in)*	€ / X			
	Total in € *(do not fill in)*				

Reimbursement will be done according to the internal rules of the organising institution. Travel expense evidences must be sent to the adress above within 60 days from the last day of the attended event. After that period no reimbursement will be made available. For general rules for reimbursement please also refer to the second sheet of this document.
I hereby certify that this declaration is true and accurate and that I will not be reimbursed by other sources.

Date: _____ Signature: _____