Annex 3 to Order No 50/2019 of the Director of the National Science Centre on the conditions of reimbursing travel expenses to foreign members of Expert Teams of 26.07.2019

|  |  |  |  |
| --- | --- | --- | --- |
| *official seal* |  | **SETTLEMENT OF TRAVEL EXPENSES NO** |   |
|  |  |  |  |  |  |  |  |
|  |  | *of (date)* |  |  |  |  |
|  |  |  |  |  |  |  |  |
| *for* |  |  |  |
|  | *(name)* |  |  |
| *acting in the capacity of* |   |  |  |  |  |
|  |  |  |  |  |  |  |  |
| *to* |   |  |  |  |  |
|  |  |  |  |  |  |  |  |
| *for the period from* |   |  | *to* |   |  |
|  |  |  |  |  |  |  |  |
| *for the purpose of* |   |  |  |  |  |
|  |  |  |  |  |  |  |  |
| *means of transport:* |   |  |  |  |  |
|  |  |  |  |  |  |
| *bank account number* | IBAN:BIC/SWIFT: |  |  |  |  |
|  |  |  |  |  |  |  |  |
|   |   |   |   |   |   |   |   |
|  |  | **TRAVEL EXPENSES RECEIPT** |  |  |
|  |  |  |  |  |  |  |  |
| **DEPARTURE** | **ARRIVAL** | means of transport | travel expenses |
| city | date | time | city | date | time |
|  |  |  |  |  |  |  |  |
|   |   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |   |
| *Verified with respect to integrity and accounting* |  | *Verified with respect to the content* | Total travel and local transportation |    |
|   |  |  |   | Other expenses according to annexes |  |
| *date and signature* |   | *date and signature* | **TOTAL AMOUNT** |   |
|   |   |   |   | **To be paid** |   |
| Approved for the amount of: |   |  |   |
|   |  |  |   |
|  |  |   | I hereby submit this receipt |
|   |  |  |   |  |  |  |   |
| *date and signature of the Chief Accountant* |  | *date and signature of the Director* |   |  |   |   |
|   |  |  |  | *date* |  | *Expert’s signature/ ID* |