Załącznik nr 3 do

Zarządzenie nr 1/2018

Dyrektora Narodowego Centrum Nauki

w sprawie

warunków zwrotu kosztów podróży dla zagranicznych członków Zespołów Ekspertów

z dnia 16-01-2018

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| *pieczątka instytucji* | |  | | **ROZLICZENIE KOSZTÓW PODRÓŻY NR** | | | | | | | |  | | |
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| *środki lokomocji:* | |  | | | | | |  | |  | |  | |  | |
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| *nr rachunku bankowego* | |  | | | | | |  | |  | |  | |  | |
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|  | |  | **RACHUNEK KOSZTÓW PODRÓŻY** | | | | | | | |  | |  | | | |
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| **WYJAZD** | | | | | **PRZYJAZD** | | | | | | środki lokomocji | | koszty przejazdu | | | |
| miejscowość | data | | godzina | | miejscowość | | data | | godzina | |
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| *Sprawdzono pod względem formalnym i rachunkowym* | | | *Sprawdzono pod względem merytorycznym* | | | | Razem przejazdy, dojazdy | | | | | |  | | | |
|  |  | |  | |  | | Noclegi wg rachunków | | | | | |  | | | |
|  |  | |  | |  | |
| *data i podpis* |  | | *data i podpis* | | | | Inne wydatki wg załączników | | | | | |  | | | |
|  |  | |  | |  | | **SUMA OGÓŁEM** | | | | | |  | | | |
| Zatwierdzono na kwotę: |  | |  | |  | | Pobrana zaliczka | | | | | |  | | | |
|  |  | |  | |  | | Do wypłaty / zwrotu | | | | | |  | | | |
|  |  | | | |  | | Niniejszy rachunek przedkładam | | | | | | | | | |
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| *data i podpis Głównego Księgowego* |  | | *data i podpis Dyrektora* | | | |  | |  | |  | |  | | | |
|  |  | |  | |  | | *data* | |  | | *podpis* | | | | | |