**SETTLEMENT OF TRAVEL EXPENSESi**

*For (name)*

*To (place)*

*Reason*

*Bank account number:*

*IBAN*

*SWIFT*

*CURRENCY*

|  |
| --- |
| **TRAVEL EXPENSES RECEIPT** |
| **DEPARTURE** | **ARRIVAL** | Means of transport | Travel expenses according to receipts  |
| City ii | Date | City ii | Date |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
| Other expenses according to annexes |  |
| **TOTAL AMOUNT** iii |  |

I hereby submit this receipt

Date Click or press to enter the date

………………...............................................

(Expert’s electronic signature/ID)

 i Non-refundable expenses

|  |  |
| --- | --- |
| **No** | **List of basic non-refundable expenses** |
| 1 | Private expenditure not related to tasks performed to the NCN  |
| 2 | Registered luggage cost  |
| 3 | Insurance cost |
| 5 | Motorway toll, parking fees, petrol, etc, if traveling by car |

ii Traveling starts/ ends at the place of residence or work.

iii The total travel cost must not exceed the equivalent of:

- **700 EUR** if traveling from/to Europe

- **2,000 USD** if traveling from/to other countries