

## Travel reimbursement request

Please mark appropriate boxes and fill in fields

Requester (last name, first name)			3.421.006	
Travel destination (city, country)				
Purpose of travel (title of event)		start of event (date)	end of event (date)	
The trip will be conducted by	cost estimate	other costs	cost estimate	
☐ bus/train		conference fee		
airplane		accommodation		
private car				
as passenger traveling with				
Banking information (German banks only)		Name of account holder		
The banking information is already on file at HGS-HIRe and has not changed		Account number		
Changed		Routing number (BLZ)		
A payment advance is requested (80 % of cost estimate)				
no yes, amount				
Traveler (date, signature)				
Supervisor (date, signature)				
The request has been accepted by HGS-HIR	e			
Date	_	HGS-HIRe representativ	re	