relevant departmental a	diffinistration together with the	supporting do	cuments.				
University:	khb						ses
Surname, first name:					Department:		
Destination (address)					Bank:		
and, where necessary, (country) of trip:			IBAN:				
Trip schedule						Explanation / Exa	ımples:
Start of trip (date, time, place of departure):						Departure from private flat, university etc.	
End of trip (date, time, place of arrival):						Arrival at private flat, university etc.	
Where necessary, observations on trip schedule:						Several items of official business successively, several changes of place, routes not the most direct possible	
If private overnight stay was integrated into trip: from when to when?						Following end of conference private overnight stays in locality	
Arrival and departure	transfore nublic transport de	ring journay]	The following are
Means of transport	transfers, public transport do Cost in € or, by car, kilometres travelled	Where relevant, foreign currency	Route from to	., observations	if necessary		recognised (to be completed by SC H):
Used on this journey we	re: O BC 25 O I	I BC 50 O B	C 100 O Jobtick	cet O Deutso	chland-Ticket	I O other:	
	O own car O I	was a passen	ger O rental car C	university car	O other:		
	e as a passenger: (name) on				the route		
	rain ticket/flight was reimbursed/paid for by the y:						
If a rental car or taxi was	s used, please provide reason(s	s). Where sev	eral iournevs were n	nade. please al	ocate reason	(s) to iournev(s):
	business was not otherwise acc		,	,,		(-, ,) (-,
·	of transport would have been		/e				
	ary journeys between 10 pm ar	•					
	agile / cumbersome luggage ha		orted, specifically:				
	n to personnel department, or a		•				
O Other:							

Settlement of business trip costs

Please fill in the light gray fields on the computer. Then print out, sign and submit to the

relevant departmental administration together with the supporting documents.

Received (date): ______ (to be completed by administration)

Overnight accommod		The following are recognised (to be			
Date / Period of time	Cost in € or private accommodation	Where relevant, foreign currency	Name of hotel / accommodation / private		completed by SC H)
O My accommodation of	costs were reimbursed / paid for	r by the followi	ng third party:		
-	ore than €70 per night, please p	-			
			• ,		
	conference hotel and the other	-			
	of business and in locality there earch, e.g. trade fair in progres		aper hotels available at that time despite an		
O Other:	earon, e.g. trade fair in progres	· · ·			
O Guion.					
Ancillary costs					The following are
Type of cost (entrance fees, participation fees, filling up with petrol, parking charges etc.)	Cost in €	Where relevant, foreign currency	Observations or reason(s)		recognised (to be completed by SC H):
Transfer Strategy					
				_	<u> </u>
Further general observa	ations on trip:			Total where appropriate,	0,00
Did I receive an advance	university subsidy minus advance				
	Sum to be paid	0,00			
I ensure that the informathe expenses I am claim or have already been personal transfer or have	The sum to be pa	aid will be transferred into ned bank account.			
, ,	,			Calculation is con	rect:
Date / signature of pers	Date / signature SC H				
Preliminary accuracy ch	eck by university administration	n:			
Date / signature univers	sity administration				