Statement of Travel Expenses To Department 44.2 – Travel Expenses



1	Personal information	UoC personal number (if known) not LBV (Regional Authority) number
	Title / last name, first name	Date of birth
ı	Faculty / Department / Institute / Seminar UoC: may use stamp	Email
İ		Extension Phone 1
		2
	Home address	Distance between your home and place of work
ŀ		km
ŀ	UoC employees: use salary account Please remember to inform the responsible person in Department 41 – Staff	External applicants: Please enter your bank account information
	Management – of any changes in your bank account information. It is not enough to notify the Regional Authority for Compensation and Retirement (Landesamt für Besoldung und Versorgung – LBV). We can only process this application if Department 41 has all your current information.	BIC/SWIFT
_	··· · · · · · · · · · · · · · · · · ·	Bank
2	Duration of travel	If travelling abroad, please indicate the time of border crossing (In the case of air travel, please indicate the landing times)
	Start of travel (starting from home/office)	Outward:
ĺ	End of travel (at home/office)	Return:
Ì	Duration, purpose and place of business	Was your business trip preceded or followed by a vacation ?
ı	Start of business	No Yes, from to to I
	End of business	l tolDate Time Date Time
	Purpose of travel/ Event title	Indication of trip times if you made a round trip or returned home every day (if necessary, attach separate sheet) Round trip: Arrival/Landing Return/Depart Destinations
	Destination(s) and country(s) 2 3	Daily return home: Start Return home/office 1. from to to Date Time to to Date Time to to Date Time to to 3. from to Date Time to to
3	Meals (Mandatory information for the calculation of daily rates)	Date Time Date Time I waive my right to a daily allowance (no further information on point 3 necessary)
	Were free meals provided by other official institutions (e.g. universities)? Or	Free meals were provided on the following days:
	were meals included in the conference fee/the hotel or flight booking? No Yes, specifically:	
	Breakfast Lunch Dinner	
4	Accommodations (please choose one of the following options)	Further details if necessary:
\exists	No refund for accommodations	
	 ☐ Accommodations were officially provided free of cost or have (already) been paid for by the UoC / by a third party ☐ No accommodations, or daily return home (own flat / house) ☐ I waive my right to reimbursement of accommodation costs / daily rate for accommodations 	
ĺ	Reimbursement for the fixed daily rate for accommodations	Further details if necessary:
	☐ I stayed with friends / family (Germany 20€ / abroad 30€ per night)	
	Reimbursement for accommodation costs (please include receipts) Below the maximum rate (see right column) Maximum rate or above (if your accommodation costs are above the maximum daily rate, please provide compelling reasons)	The maximum refundable daily rate for accommodations in Germany is 80 €. For the maximum refundable rates of accommodations abroad, please see the list of countries on our website (Department 44.2). Should your accommodations expenses exceed the maximum rates, we can only refund the difference if the necessity is explained:
	Total Accommodations:€	

V. 10.05.2022

5	Transportation (please include receipts)			Please use the Appendix "Table of Travel Costs" if you have many receipts (see our		
	Means of transportation	Paid class	total EUR	website) *According to the Law on Travel Expenses of North Rhine-Westphalia, you must give		
	train* <i>BahnCard</i> □ 25 □ 50 □ 100			reasons in writing for travelling in a higher class than economy, taking domestic flights and for the use of a taxi or rental car (indication of official/compelling personal		
	Bus/tram			reasons). Reasons:		
	airplane*			First-class for rail travel due to duration of 2 hours or more (one way)		
	·			Use of next higher class from pure flight time of at least 5 hours		
	rental car			Severe disability (markers G, aG, GI, BI, Tbl or H)		
	taxi*			Other:		
	other			If you took a taxi, please indicate the starting point and destination as well as the starting time:		
		Total transporation:				
6	Company car (if applicable, continue with no. 9)					
	A company car was used					
7	Reimbursement for the use of private vehicles			Transport of bulky business equipment or items weighing more than 40 kg		
一	Reimbursement of mileage allowance			Other:		
	It ist hereby confirmed that a com		ided.			
	Private car	<u>=</u>	km	Further details if necessary:		
	Private two-wheeled veh	nicle =	km			
	Other	=	km			
8	Reimbursement for taking other participants (in private car))		S (in private ca	Further details if necessary:		
	Names of passengers		kilometers			
9	Additional costs (include re	eceipts)	EUR	If applicable, please subtract the cost of for a conference dinner that was included in the conference fee (not refundable).		
	Conference fee			Further details if necessary:		
Ī	Required visa					
Ī	Other I					
	Other II					
10	0 Financing information					
	☐ I have received an advance payment from the University of Cologne on my travel expenses. Date: Amount: €					
	Costs were/will be covered by a third party (grants)€ Description (include receipts)					
ĺ	Please limit the reimburse	ement of travel expense	s to			
ľ	Financing: cost center or PSP element (mandatory information) Further information on financing details					
ŀ	Reisekosten Interne Dienstreise (685000) Reisekosten StipendiatInnen (730160)					
	Ledger Reisekosten Interne I Weiterhildung (685100) Reisekosten int SOKRATES (685010)					
	Account Reisekosten Interne (685200) Reisekosten Dozenten ERASMUS (685050)					
	- It is hereby confirmed that a more cost-efficient way of completing official business, particularly by use of digital					
	 communication media, is not possible or not reasonable. Please include the travel authorization / delegation in printed form and all original receipts (not photocopies). 					
	- According to section 3 of the Law on Travel Expenses of North Rhine-Westphalia (Landesreisekostengesetz), all statements of					
	travel expenses must be submitted to the Travel Expenses Department within six months, beginning on the first day after returning from the business trip).					
ĺ	Applicant			Head of institute / department (cost centre manager)		
	I hereby duly confirm that the	ne provided information	is correct	The provided information is factually correct.		
	X			X		
	Date/Signature			Date/Signature Name in block letters		