Travel Accounting

Space following writing in red must be filled in. Please return within 8 days after end of journey.

Name

Persons with a Danish CPR no. will have the amount



*Please return to:*

Home Address Postal code & Town Country

SDU-department

Destination Address Purpose

transferred to their 'NemKonto'

CPR no.:

Banking details: Reg. no.

|  |  |
| --- | --- |
| *Reserved for Administration*  *(skal udfyldes af institut/afdeling)* | |
| Underkonto | 10 |
| Artskonto | 221000 |
| Omk.sted 1 | 19000 |
| Formål |  |
| Projekt |  |
| Analyse | 19031 |
| Omk.sted 2 |  |
|  |  |

Account no. IBAN/ABA:

Swift code Bank Name

Departure Date Return Date

Time Time

Bank Address Account holder

Currency Exchange rate Approved grant amount DKK:

Udfyldt af:

|  |  |  |
| --- | --- | --- |
| Transportation costs (According to original vouchers) Ticket Price | Amount/DKK | Additional Information |
|  |  |  |
| Use of own car. Reg. no.: Kilometre (in total) | \*) |  |
| Night allowance without documentation: | \*) |  |
| Accomodation:  Per diem payment according to vouchers  *Or* per diem payment withour vouchers  No. of meals offered: Breakfast Lunch Dinner  Board meals (according to vouchers):  Other expenses, type (according to original voucher): |  |  |
|  |  |  |
| Total Expenses  \*) The Danish tax authorities are informed Total amount to be reimbursed |  |  |
|  |

*Reserved for Accounting Office:*

Certified by Head of Department:

Traveller's signature:

*Completed by:*

*Checked by:*

Date

Date

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| UK | Artskonto | Omk. 1 | Formål | Projekt | FK | Analyse | Omk. 2 | D/K | Beløb | Beskrivelse |
|  |  |  |  |  |  |  |  |  |  |  |
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