

A.I.C.S. DIREZIONE NAZIONALE
Via Barberini, 68
00187 ROMA
C.F. 80237550589

Reserved for the accounting office

Date of Payment:

REFUND REQUEST

request for reimbursement of expenses anticipated and incurred for the AICS EuMamanet project:

Mr/Mrs
Resident in

Street n° zip code.....

Date of birth...../...../..... City..... Country.....

Tax ID Code.....

Phone..... Email.

Departure City..... Departure date.....

Return City Return date.....

ATTACH A COPY OF AN IDENTITY DOCUMENT

Trip made to (Country/City).....

Reason for the trip

AMOUNT TO RECEIVE **Euros**

It will not be possible to pay the amount without attaching the original documentation (receipts, invoices etc.)

Signature

DETAILS OF TRAVEL AND SUBSISTENCE EXPENSES**1. TRAVEL COSTS**

a) PLANE	€uro.....
b) TRAIN	€uro.....
c) PUBLIC TRANSPORT	€uro.....
d) TAXI	€uro.....

2. SUBSISTENCE COSTS

a) MEALS	€uro.....
b) HOTEL ROOMS	€uro.....

3. OTHER DOCUMENTED EXPENSES

a) _____	€uro.....
b) _____	€uro.....
c) _____	€uro.....
d) _____	€uro.....
e) _____	€uro.....
f) _____	€uro.....
g) _____	€uro.....
h) _____	€uro.....
i) _____	€uro.....

AMOUNT TO BE PAID: (1 + 2 + 3)**EUROS.....**

IBAN CODE:

SWIFT CODE: