# Reimbursement Procedure Information

First step is to complete the form that is located in this internet page. After this, print the completed form to PDF and directly on paper.

Second step is to submit the completed form and attachments to the NA1 Exchange Program administrator by email.

Third step is to send the form on paper and the required attachments (receipts and expert exchange report of the visit) to the NA1 Exchange Program administrator via normal mail to the address below. Don't forget to sign Your form!

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# Reimbursement Electronic Form

## Basic Information

Surname:

Forename:

**ITINERARY**(1)

Indicate place of departure, mission destination, return address and stopover

|  |  |  |  |
| --- | --- | --- | --- |
| **From** | **Date and hour** | **To** | **Date and hour** |
|  |  |  |  |

**(1) If you have a combination of plane and train or a combination of planes, please indicate all steps.**

## Travel Expenses

EXPENSES TO BE REFUNDED:

|  |  |  |
| --- | --- | --- |
| Accommodation |  | *Invoice* |
| Plane |  | *Invoice or electronic ticket* |
| Train, Bus, etc. non-local transportation |  | *Transport document* |
| Car rent (2) |  | *Renter invoice* |
| Fuel (car rental) |  | *Invoice or ticket* |
| Taxi (3) |  | *Invoice or ticket* |
| Conference registration |  | *Invoice or ticket and conference agenda* |
| Other (specify nature) : |  | *Invoice or ticket* |

**Note!** The only allowed file format that is accepted is PDF. Include your invoices etc. in one file.

**Note!** VATs shall be indicated in the refundable receipts.

**Note!** VATs will NOT be refunded.

**(2) An authorization is necessary 🡪 A request must be made to the Project Office before travel.**

**(3) Taxi costs will be accepted only if public transportation is not available.**

## Daily Allowance, Per Diem

[**Per diems**](http://europlanet-scinet.fi/index.php?id=223)**cover meals, local transportation and sundry expenses.** Submit travel days with 0.5 day accuracy (e.g. 2.5). The day count starts from the departure from home/office and ends to arrival to home/office.

|  |  |  |  |
| --- | --- | --- | --- |
| Days: |  | Country: |  |
| Days: |  | Country |  |

If you stay in more than one country during your visit, please fill information from each country separately.

I CERTIFY EXACTITUDE OF THE INFORMATION GIVEN AND ATTEST PRESENCE OF JUSTIFYING DOCUMENTS

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date and place