

EXPENSE CLAIM FORM

Bank information for European bank accounts

Name and complete address of your bank :

Grid for name and complete address of your bank.

Name and complete address of your bank : Bank account*

*UK : + sort code
*GERMANY : + BLZ

IBAN :

Grid for IBAN.

BIC (SWIFT address)

Grid for BIC (SWIFT address).

Bank information for Non-European bank accounts

Name and complete address of your bank :

Grid for name and complete address of your bank (Non-European).

Bank account :

Grid for bank account (Non-European).

ABA ROUTING

Grid for ABA ROUTING (Non-European).

SWIFT ADDRESS :

Grid for SWIFT ADDRESS (Non-European).

PLEASE DO NOT FORGET TO INCLUDE :
THE ORIGINAL TICKETS OR E-TICKETS
THE BOARDING PASSES
THE ORIGINAL INVOICES
A PHOTOCOPY OF YOUR PASSPORT OR ID
WITHOUT THESE BANK INFORMATION AND DOCUMENTS WE CANNOT REIMBURSE YOU.

I confirm that the expenses claimed on this form have been actually and necessarily incurred by me, solely for : U.L.B. – Département de Mathématique

DATE :

SIGNATURE :

Return this form to :
U.L.B. – Département de Mathématique – CP 213 – Boulevard du Triomphe – 1050 BRUXELLES – Belgium