

Remuneration/Travel reimbursement

for foreign guest researcher/lecturer

UNIVERSITET				To be filled out by administration:				
			Date	Reg	nr enl skattemynd b	peslut (beslutet bifogas)		
Last name		First name	First name			Tax Identification Number (TIN) in the country of resid.		
Home address				Pas	Passport number			
		Country		EU-	citizen			
		·			Yes	No		
Address while in Sweden				Dur	ation of stay			
Department				Adn	less than 6 month ninistrator + phone n		nths	
_ oparanont				7 (3.1)	minorator - priorio n	iamos.		
* Please attach a copy of ye	our passport or other doc	umentation of identification.						
on 20%, or whether Swed	len has a tax agreement v	ational identity number from vith your country to avoid do tion Number) should be enc	uble taxation. Sw	eden has agreeme	nts on exchanging ir	ncome statements with nu		
Payable to:								
Bank		Swift/BIC						
Bank address			Sort code					
			ABA/FW/Routing					
Account number			IBAN-number					
Information about the stay:	travel, purpose, route, da	ates etc.						
Remuneration amou	nt						kr	
	let och/eller i Sverige, dela up	op arvodet så att rätt belopp kan	beskattas i Sverige)				
Net expenses	SINK-alisokali	kr	V.A.T (svensk moms)		r Travel reimbursement amount k		kr	
Tickets, hotel & taxi receipt	attached							
Tax according to attached \$	SINK-decision	kr	Total amount	is navahlo			kr	
Tax according to attached	Sittle docioion							
Signature of guest		_	Head of departm	ent signature and r	ame in block letters			
To be filled out by de	epartment:							
Rapportering (lönes	sektionen):		Kontering (ifylles av inst):			
Löneart From	Tom	Belopp	Ansvar	Verksamhet	-	Fritt fält		