

Statement of Expenses

Personal details		
Please type or print in capital letters	in English	
Family Name	First Name	
Institution		
Address		
Phone	Fax	E-mail
Meeting/event		
Date of event	Location	For ESMO Committee
done against original invoices/ your home to the meeting locat	vouchers (for air e-tickets, enclose boa ion and back (airfare and train fare; car	nnection with ESMO meeting activities, and for legal reasons this can only be arding pass receipt). ESMO's reimbursement comprises transportation from r = train fare if nothing else is agreed upon beforehand; taxi, and parking at luggage insurance is neither reimbursed by ESMO nor ESMO's responsibility.
Expense items (only 0	RIGINAL bills or vouchers w	vill be reimbursed)
Currency used		
Food & Drinks		
Honorarium		
Travel+Park, etc.		
Hotel		
Other, specify		
Total	□ Please tra	nsfer the amount to the following bank account:
Bank Account (IBAN number	+ BIC code mandatory for EU + EFTA co	puntries) For office use only
Please type or print in capital letters	in English	
Account no. / IBAN		
Name, account holder		
Name of bank		
Branch		
City		
BIC		
SWIFT		
Country		

Return the completed form to

asiacongress@esmo.org