

Dutch Neuroscience Meeting (DN 2017)

Lunteren, 15-16 June 2017

Please read carefully and provide the requested information to ensure timely refunding!
Please type! Handwriting can lead to confusion.

Reimbursement Form

Travel Expenses (use local currency price):

Airplane

Train/Bus/Car

Taxi

Additional Hotel Expenses:
----- +

Total (will be calculated by Treasurer):

Name account holder:

Name:

Address:

ZIP-code/City:

Country:

FOR THE NETHERLANDS: Bank account number:

FOR EUROPE: IBAN number:

BIC(SWIFT address):

FOR THE USA: bank account number:

Routing number/Fed wire (9 digit number)

FOR BOTH EUROPE AND THE USA, please provide also:

Bank Name:

Address (**of Bank Account!**):

ZIP-code/City:

Country:

Please note:

- If the currency of your costs is different from EUR, the organisers will use the day rate at the time of the reimbursement.
- Swift transfer of the money can only be guaranteed when all information is completed. In this respect the correct info on IBAN, SWIFT, Routing number are of utmost importance and can delay reimbursements. Please check with your bank in case of uncertainty.

Please return this form (together with originals or copies of your tickets!) no later than 15 JULY 2017 to (preferably by e-mail to m.j.h.kas@rug.nl).

Prof. dr. Martien J.H. Kas

GELIFES

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Requests received after 15 July 2017 will not be considered