Purpose:

**Letter of Reimbursement**

Date:

**Personal information**

Name:      Signature:

Address:

Postcode & Place:      Country:

Phone: +      E-mail:

**Payment information**

Receiving party:

Banks name:

Address:

Account number (those with Swedish bank account):

IBAN number:      BIC/SWIFT code:

*(IBAN and BIC/SWIFT is not necessary if you use a Swedish bank account)*

**List of expenses (original receipts enclosed)**

|  |  |
| --- | --- |
| **Text** | **Amount & currency** |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
| **Total** |  |

**Send by post to:**

Einar Eftestøl

Department of Biosciences

University of Oslo

P.B. 1066, 0316 OSLO

NORWAY

Contact: contact@scandphys.org