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ent GmbH 58-6323

## **Reimbursement of costs**

Last name, first name:	
Address:	
Bank:	
IBAN:	
SWIFT-Code (BIC):	
The following costs should be reimbursed:	
Course date / Course name	e:
Amount:	€
Please enclose your origin	nal receipts.
Date and Signature of applicant:	
Confirmation of the clinic:	

Following the German law (German Federal travel expense law (BRKG) and Saxon travel expense law (SächsRKG, § 3)), the travel expenses will be reimbursed by the competent authority (in this case: Carl Gustav Carus Management GmbH) on presentation of the relevant original receipts in written or electronic form within six months at the end of the business trip.