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Travel expenses

Last name, first name:	
Address:	
Bank:	
IBAN:	
SWIFT-Code (BIC):	
	ne:
The following costs shou	ld be reimbursed:
Train:	=
Car:	=
Flight:	=
Taxi:	=
Hotel:	=
Amount:	=
Please enclose your origi	inal receipts.
Date / Signature of applic	ant:
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.