

# FÉDÉRATION INTERNATIONALE DE LUGE

INTERNATIONALER RODELVERBAND  
INTERNATIONAL LUGE FEDERATION  
Oberst-Lepperdinger-Straße 21  
5071 Wals-Siezenheim, Austria  
ZVR 801319517



## Travel Costs Reimbursement

(valid as of April 1, 2023)

Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Function: \_\_\_\_\_

Travel from: \_\_\_\_\_ to: \_\_\_\_\_ and back

Start of the journey (date/time): \_\_\_\_\_

End of the journey (date/time): \_\_\_\_\_

Reason for travel: \_\_\_\_\_

1. **Expenses for** (Flight, rental car, ship, ...) € \_\_\_\_\_

Private car: \_\_\_\_\_ km (pro km = €0.55) € \_\_\_\_\_

2. **Accommodation costs** (with receipt)

\_\_\_\_\_ nights, per night € \_\_\_\_\_ € \_\_\_\_\_

3. **Daily Allowance: over 12 hrs absence: €70; 8-12 hrs absence: €35**

(when meals are free, the following amounts must be deducted for each day:  
breakfast €10; lunch €20; dinner €20; full board €40)

**The recipient is personally responsible for  
the tax and social security  
treatment of daily allowances  
and the meeting allowances!**

1st day € \_\_\_\_\_  
2nd day € \_\_\_\_\_  
3rd day € \_\_\_\_\_  
4th day € \_\_\_\_\_  
5th day € \_\_\_\_\_  
6th day € \_\_\_\_\_  
7th day € \_\_\_\_\_  
8th day € \_\_\_\_\_  
9th day € \_\_\_\_\_  
10th day € \_\_\_\_\_

4. **Other costs** (with receipt and justification) € \_\_\_\_\_

**Total:** € \_\_\_\_\_

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I confirm hereby the accuracy of the information:

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

Amount Received: \_\_\_\_\_ Date: \_\_\_\_\_ Signature: \_\_\_\_\_

Bank Transfer: \_\_\_\_\_ Account Number: \_\_\_\_\_ Bank Code: \_\_\_\_\_

IBAN: \_\_\_\_\_ BIC: \_\_\_\_\_

Bank: \_\_\_\_\_

**All travel costs must be submitted and charged to the FIL within 90 days.**

**Travel expense reports received after this deadline will not be reimbursed.**