

# Travelling Expenses Claim

You are required to supply the following information (unless otherwise specified) in order for your application to be processed. This will be further processed by means of a Travelling Expenses Claim Program from the Central Administration. Your application will not be able to be processed if the information is missing or is not complete.  
Pursuant to §§ 21,22 LDStG you have the right to receive information on data about you stored by the University of Stuttgart upon request and free of charge and to demand the correction of the data if it has been stored incorrectly. Please send your request for information or correction in writing to Datenschutzstelle, Breitscheidstr. 2, Universitätsbereich Stadtmitte.

Institute number:

|  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|
|  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|

Institute (brief) description resp. office / place of work (if not the University of Stuttgart)

|  |
|--|
|  |
|--|

**Universität Stuttgart**  
**Zentrale Verwaltung**  
 - portal of the Travel Expenses Center -  
 Keplerstr. 7



|   |             |
|---|-------------|
| Surname, First name of the person traveling |             |
| Street                                      | Tel. (work) |
| /   |             |
| postal code / town/city                     |             |
| bank:                                       |             |
| IBAN:                                       |             |
| BIC:  |             |

|                   |       |       |   |                 |       |       |   |
|-------------------|-------|-------|---|-----------------|-------|-------|---|
| Start of the trip | Date: | Time: | <input type="checkbox"/> apartment<br><input type="checkbox"/> workplace<br><input type="checkbox"/> Other office | End of the trip | Date: | Time: | <input type="checkbox"/> apartment<br><input type="checkbox"/> workplace<br><input type="checkbox"/> Other office |
|-------------------|-------|-------|---|-----------------|-------|-------|---|

In the case of returning from the trip on the same day, please attach a separate overview

|                    |                   |   |   |                 |   |   |
|--------------------|-------------------|---|---|-----------------|---|---|
| Official business: | Start (day/time): | / | / | End (day/time): | / | / |
|--------------------|-------------------|---|---|-----------------|---|---|

The following information is not required if a flight schedule is available

| Border crossings in the case of trips abroad: | day / time | Border location | from / to (country indicator) | day / time | Border location | from / to (country indicator) |
|---|------------|-----------------|-------------------------------|------------|-----------------|-------------------------------|
| Outward trip (if need be)                     | /          |                 | /                             | /          |                 | /                             |
| return trip (ggf. Transit)                    | /          |                 | /                             | /          |                 | /                             |

|  |              |  |   |  |   |
|--|--------------|--|---|--|---|
| I paid for   | Appendix no. | Amount                                   |   | I used:  |   |
| <input type="checkbox"/> Rail                                    |              | 0,00                                     | € | <input type="checkbox"/> Company car from the central motor pool/the institute               |   |
| <input type="checkbox"/> Public transport                        |              | 0,00                                     | € | <input type="checkbox"/> a hire car  |   |
| <input type="checkbox"/> Hire car                                |              | 0,00                                     | € | <input type="checkbox"/> my own private car with cubic capacity                              | <input type="checkbox"/> over 600 ccm <input type="checkbox"/> to 600 ccm       |
| <input type="checkbox"/> Fuel                                    |              | 0,00                                     | € | <input type="checkbox"/> my car licensed by the Central Administration for the business trip | (in total in the current year up to now I have submitted my claim for _____ km) |
| <input type="checkbox"/> Airplane                                |              | 0,00                                     | € | <input type="checkbox"/> reimbursement for the route for a total of _____                    | driven km   |
| <input type="checkbox"/> Long distance bus                       |              | 0,00                                     | € | <input type="checkbox"/> passenger bonus for a total of _____                                | driven km   |
| <input type="checkbox"/> Hotel                                   |              | 0,00                                     | € | Name(s) of the passenger/s: 1) _____   |   |
| <input type="checkbox"/> Attendance fee                          |              | 0,00                                     | € | 2) _____   |   |
| <input type="checkbox"/>   |              | 0,00                                     | € | 3) _____   |   |
| <input type="checkbox"/>   |              | 0,00                                     | € | Signatures of the passengers: 1) _____   |   |
| (Calculation by clicking the right mouse key on "update fields") |              |  |   | 2) _____   |   |
|  |              |  |   | 3) _____   |   |
| I was (also) able to use the following ticket for this journey:  |              |  |   |  |   |
| <input type="checkbox"/> BahnTix,                                |              | <input type="checkbox"/> BahnCard 25/50, |   | <input type="checkbox"/> Passenger bonus for (>50kg) _____ kg baggage to _____ km            |   |
| <input type="checkbox"/> Travel card / BahnCard 100,             |              | <input type="checkbox"/> Monthly ticket. |   |  |   |

|   |                             |  |                                    |        |   |
|---|-----------------------------|--|------------------------------------|--------|---|
| Benefits granted in the business context (or included in flight costs, hotel costs, attendance fees and the like) |                             |  |                                    |        |   |
| Catering included   | <input type="checkbox"/> no | <input type="checkbox"/> yes, as follows |                                    |        |   |
| Stating date  |                             |  | <input type="checkbox"/> Breakfast | time s | <input type="checkbox"/> Lunch                        |
|   |                             |  | at                                 | _____  | at  |
|   |                             |  | at                                 | _____  | at  |
|   |                             |  | at                                 | _____  | at  |
|   |                             |  | at                                 | _____  | at  |
| Free overnight stay   | <input type="checkbox"/> no | <input type="checkbox"/> Yes, as follows | times,                             | at     | <input type="checkbox"/> paid by a third party        |
| Fee/allowance   | <input type="checkbox"/> no | <input type="checkbox"/> yes             | Totaling                           | €      | <input type="checkbox"/> with relatives/acquaintances |

I dutifully confirm the correctness and completeness of the information I have provided:

|       |      |                                   |
|-------|------|-----------------------------------|
| Place | Date | Signature of the person traveling |
|-------|------|-----------------------------------|

| Already paid by the institute | € | Type of costs | Cost center | Fund | Receipt no. |
|-------------------------------|---|---------------|-------------|------|-------------|
| Discount                      |   |               |             |      |             |
| Flight/travel expense         |   |               |             |      |             |
| Hire car                      |   |               |             |      |             |

|                    |  |      |  |  |  |
|--------------------|--|------|--|--|--|
| Participation fees |  |      |  |  |  |
| Hotel costs        |  |      |  |  |  |
| Accurate           |  |      |  |  |  |
| Place              |  | Date |  | _____<br>Signature and capacity of the auditor |  |

english guide