Annex 4 to Ordinance 100/2021 of 22’nd September 2021  
**Foreign trip settlement no. …………………………**

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Duration of the trip: Departure……………...time…………….  Arrival…………….time………….....  Target country and city: ………………………………………………………………….. | | | | | Duration of abroad stay: Departure from the country……………….time……………..\*  Arrival to the country……….............time….………….\*  \* for travel by air: the times of take-off and landing, respectively | | | | | | |
| A report on a trip lasting 30 days and shorter - if there is no space - fill in the content on the reverse of the page (a report on a trip lasting longer than 30 days is attached as Annex 5 to the Ordinance) | | | | | | | | | | | |
| Provided board: Full/ no  Breakfast - ………………. (number of days)  Lunch - ………………. (number of days)  Dinner - ………………. (number of days) | | | | | I declare, that:  1. **a) I have not** incurred costs related to travel **from / to the station / airport** in the destination city abroad 2. **b) I have not** incurred costs related to travel **by local means of transport** in the destination place abroad | | | | | | |
| I present the cost breakdown below : Date an signature of the departing person: …………………………………………………………………………………………………………………………………………………. | | | | | | | | | | | |
| The execution of the referral abroad was checked in formal terms......................................................................... *date and signature of the authorized person* | | | | | I confirm the implementation of the referral of the trip abroad.................................................................................. *date and signature of the Vice-Rector / Chancellor* | | | | | | |
| Statement of costs in the Polish currency : | | | | | Statement of costs in the foreign currency : | | | | | | |
| No. | Specification | Quantity | Amount | Value | No. | | Specification | Currency | Quantity | Amount | Value |
| 1. | Subsistence allowance |  |  |  | 1. | | Subsistence allowance |  |  |  |  |
| 2. | Travel |  |  |  | 2. | | Travel |  |  |  |  |
| 3. | Accommodation |  |  |  | 3. | | Accommodation |  |  |  |  |
| 4. | Other |  |  |  | 4. | | Lump sums |  |  |  |  |
|  | | | Total |  |  |  |  |  |
| 5. | | Registration fee |  |  |  |  |
|  | | | | | 6. | | Other expenses |  |  |  |  |
|  | | | | | Total |  |
| Settlement in Polish currency : | | | | | Settlement in foreign currency : | | | | | | |
| Name | | | Amount | | Name | | | | Amount | | |
| Advance: | | |  | | Advance: | | | |  | | |
| Means transferred by bank transfer: | | |  | | Means transferred by bank transfer: | | | |  | | |
| Means paid by cash: | | |  | | Means paid by cash: | | | |  | | |
| To be paid | | |  | | To be paid | | | |  | | |
| To be returned | | |  | | To be returned | | | |  | | |
| **Total for payment / refund:** | | | | | | | | | | | |
| Checked in terms of formal and accounting ……………………………………….  Date and signature | | | | | | Confirmation of the settlement ………………….………………………………………………………..  Date and signatures of accepting parties | | | | | |
| Paid | | | | | | | | | | | |
| Bank transfer on ………………………  Auto payout on ……………………………………..  ……………………………………………  *Date and signature* | | | | | | Received at the cash desk:  Foreign currency…………………….  Polish currency…………………….  In words…………………………………………………..  ……………………………………………  *Date and signature* | | | | | |