



An Accounting of a Business Trip No. _____ to _____

taken: from _____ until _____

| | |
|--|--|
| Surname, name, title, personal number | |
| The regular workplace based on the employment contract | |
| The purpose of the business trip | |
| The place, date and hour of the beginning of the business trip | |
| The place, date and hour of the crossing of the borders | |
| The place, date and hour of the end of the business trip | |
| The place, date and hour of the crossing of the borders | |
| The length of the stay abroad in days | |
| The means of transport used | |
| The exact itinerary | |

A/ The Reimbursement of Travel Expenses in the Czech Republic while Using a Road Motor Vehicle

| | |
|--|--|
| Hours in the Czech Republic before the crossing of the borders | |
| Hours in the Czech Republic after the crossing of the borders | |
| Transport by a road motor vehicle of a brand | |
| Cylinder volume/average fuel consumption as stated in the registration certificate | |
| Total kilometers travelled in the Czech Republic | |
| Total kilometers travelled abroad | |
| Kilometers travelled in total | |
| Meal allowance in the Czech Republic | |

B/ Accommodation Costs

The Employee's Statement on the Reimbursements Paid beyond the Advance Payment Covered by the Workplace

| | | |
|---------------------------------------|--|--|
| Free meals | YES <input type="checkbox"/> NO <input type="checkbox"/> | |
| Free accommodation | YES <input type="checkbox"/> NO <input type="checkbox"/> | |
| Breakfast as part of accommodation | YES <input type="checkbox"/> NO <input type="checkbox"/> | |
| Travel allowance | YES <input type="checkbox"/> NO <input type="checkbox"/> | |
| Congress fee | YES <input type="checkbox"/> NO <input type="checkbox"/> | |
| Other reimbursements outside the IOCB | YES <input type="checkbox"/> NO <input type="checkbox"/> | |

I declare that all the information above is complete and correct.

The date and the employee's signature