					Frankfurt,		
From: Institute'	s stamp				,		
Contact for que	ries:						
Name:							
Tel.:							
Email:							
(in block capitals)							
To the							
President		_					
of Goethe Univer - Equal Opportu							
PO Box 227,	iities Oilit	-e -					
SKW Building, We	estend Car	npus					
Payment orde	er regardi	ing the					
Faculty Fund	•	•	of Active	Recruit	ment in the	Financial	Vear
ractive rana	101 1110	, romotion (J. 7.00.70	recidie	incirc in the	rmanciai	
Ms				was a gue	est at Goethe l	Jniversity	/ Frankfurt from
to _							
Promotion of							
			-				
	and	approved on _		to	the amount of	「€	·
	1.6						
		the measure ar			• •		
		eed the amoun					is borne
by the faculty: Co	st centre/	project numbe	r				
Cost Centre Mana	ager/Proje	ect Manager					_
The detailed of	ost break	down and the c	original rece	eipts are e	nclosed.		
The guest, with ta	ax number	r ¹			, is exemp	ot from V	AT^2 .
Exempt acco							
business status)	_	. ,	·		J. J	•	
<u></u>		Section 19 VAT	Act (cmall b	nucinoss zo	gulation)		
Exempt acco	nuing to S	ECTION 13 VAL	ACL (SITIALL	jusiness re	guiatiofij		

 $^{^1}$ Tax number or tax ID number are mandatory for residents and foreign business people. If <u>only</u> travel expenses are reimbursed, the tax number is not required.

² In principle, VAT (Value added tax) is due if the person is a business person, but the service provided may be tax-exempt.

Not exempt (ir	nvoice plus VAT)		
Obliged to pay	tax on the fee itself as inco	me (no business st	atus)
It is requested that	Ms		as a non-staff member of
Goethe University F	rankfurt, resident at street/	house number:	
postcode:	, town/city:	, co	ountry (if not Germany):
	, be paid €	as an expe	nse allowance from G/L account
61720000, project r	number 23000015.		
The amount results	from the cost breakdown o	n page 3 and shoul	ld be transferred to the following
account:			
Sort code and accou	unt number or IBAN:	/	
BIC or SWIFT:			
Bank:			
For the faculty - correct and acc	d) and half by the benefician	y.	
Cost Centre Manage	er's/Project Manager's signa	ture Date	Dean's signature
Name in printed let	ters/block capitals		
For the central Facu	ulty Fund for the Promotion	of Active Recruitr	ment
 correct and acc 	curate –		
Cost Centre Manage	er's/Project Manager's signa	ture	
Name in printed let	ters/block capitals		

Cost statement for the payment order	of	(date)
Cost statement		

Cost category	Amount converted into EUR ³	Original receipts enclosed	Payment amount
Travel expenses (transport, flight, accommodation)			
Travel expenses for an accompanying person necessary for childcare reasons (transport, flight, accommodation)			
Childcare costs on site in Frankfurt			
Lecture fee			
Total sum			

³ Receipts in other currencies must be converted into EUR (according to the exchange rate applicable on the invoice date). Payments are made in EUR only.