**ADVANCE PAYMENT**

 **FOR OVERSEAS BUSINESS TRAVEL1**

1. …………………………………………………………………………………………………………………………

 (first and last name)

1. ……………………………………………………………………….......................................................

 (country, border crossing dates and times)

1. ………………………………………………………………………………………………………………..…………

 (mode of transport)

1. Information necessary for the preparation of the advance payment in Currency or PLN:

 subsistence allowance

 *(meals provided) breakfast …….lunch……..dinner…….*

 travel allowance

 commuting allowance

 accommodation costs ……………..…

 conference fee …………..…

 other …………………..

*link to Ordinance*[*https://isap.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20220002302*](https://isap.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20220002302)

Collection at bank branch by bank transfer

…………………………………………………………………………………………………..

***(bank account number)***

 .…………………………………………………….

 (date and signature of the person travelling)

 *1 Form must be completed electronically*