Invoice for Reimbursement	
	Date:
From,	
Personal Details (as on Bank Account) =>	
Full Name:	
Postal Address:	
Phone Number:	
Bank Details =>	
Account number / IBAN Number:	
SWIFT code:	
Bank:	
Та	
To,	
WSPOS Trading Ltd.	
Address: The Scalpel, 18 <sup>th</sup> Floor, 52 Lime Street, London EC3M 7AF, United Kingdo	om.

Reimbursement on account of \_\_\_\_\_\_'s (Full Name) participation in WSPOS'S symposium at the \_\_\_\_\_\_ (Name of Meeting & Year) that took place in \_\_\_\_\_\_ (Country, City) from \_\_\_\_\_\_ to \_\_\_\_\_ (Dates of meeting): \_\_\_\_\_ USD (Total amount to be reimbursed).

## **Please note:**

- Considering WSPOS is a Charity (Charity Registration Number: 1144806), we will only reimburse
  return economy air fare & accommodation for only 1 night over & above the duration of the
  event will be reimbursed. We will not be able to reimburse Business class & any other class of
  travel & any additional accommodation, i.e., should the individual have extended his / her stay
  beyond the duration of the conference.
- WSPOS will reimburse up to a 1000 USD. However, should there be some form of support available from the inviting organisation, WSPOS will only reimburse up to 500 USD.

Enclosure of Invoices / Receipts & Summary of Expenditure (please submit invoices / receipts in English ONLY & please ensure that the dates are clearly visible):

- 1. Travel:
- 2. Accommodation:
- 3. Any other: Total:

Signature