

Meeting reimbursement instructions

these instructions have to be followed to obtain the COST reimbursement.

general notes

- During the meeting, you will have to daily sign an attendance list.
- You will have to claim your reimbursement within 30 days from the meeting end.
- Conference fees are not reimbursable (exception made for dissemination meetings)
- Please read the following instructions **before** the start of the event!
- All documents required in hard copy have to be sent to:

Roberta Larotonda
Università degli Studi di Milano – Bicocca
U9 Area della Ricerca
Viale dell'Innovazione, 10
20126 Milano
Italy

documents to be provided

To comply with Italian national regulations, to which the Grant Holder is bound, different cases apply depending on whether an event happens on Italian soil (IT) or not (not IT), and whether a Participant is filing taxes in Italy or not. This will generate two different cases: **case A** and **case B**.

	ITALIAN CITIZENS – Participants paying taxes in Italy	NON- ITALIAN CITIZENS – Participants not paying taxes in Italy
IT	case A: provide a hotel bill for the entire duration of your stay, as well as a receipt per meal and for transport. Transport's receipts are necessary also for the reimbursement itself as required by COST programme.	case A: provide a hotel bill for the entire duration of your stay, as well as a receipt per meal and for transport. Transport's receipts are necessary also for the reimbursement itself as required by COST programme.
not IT		case B: receipts are not necessary for hotel and meals (although we advise you to get a receipt whenever possible), while you will have to provide all the receipts for transport. The only exception is local transport: if you claim up to 25€ we do not need any receipts for it.

Detail of the expenses and documents required:

expense	case A	case B
Hotel	Receipt hard copy	Not mandatory
Meals	Receipt hard copy	Not mandatory
Flight	All the boarding passes as well as a receipt for the plane ticket showing the itinerary together with your name, plus all tickets in hard copy (<u>original</u>) (unless they are electronic).	All the boarding passes as well as a receipt for the plane ticket showing the itinerary together with your name + all tickets in hard copy (<u>original</u>) (unless they are electronic).
Train	A document showing the amount paid and the itinerary along with your name. For electronic tickets it will be sufficient to send them via email or through the eCOST interface. Otherwise, the hard copy is needed.	A document showing the amount paid and the itinerary along with your name. For electronic tickets it will be sufficient to send them via email or through the eCOST interface. Otherwise, the hard copy is needed.
Bus	Ticket hard copy	Ticket hard copy
Taxi	Taxi receipt hard copy	Taxi receipt hard copy

procedures to request reimbursement

What to do after a meeting/workshop/Conference

- Login to your personal e- COST page and insert all the claims (the webpage address is contained in the invitation letter you received through e- COST system).
- If not done for previous meetings, fill in the form “Scheda Informativa del collaboratore esterno- Dichiarazione dei Dati personali” if you pay taxes in Italy or “Non Resident Consultant - Personal Information” if you don’t, sign it, scan it and upload the file to the e- COST page (the empty forms can be found at the end of this document). Remember to add your italian social security number (codice fiscale) in case you happen to have one.
- If not done for previous meetings, scan your passport and upload it to the e- COST page (or the Identity Card for italians).

case A	case B
• Scan travel tickets, boarding passes, train tickets, local transport tickets, parking tickets, toll tickets (for people traveling by car), restaurant receipts, hotel invoices and upload the files to the e- COST page.	• Scan travel tickets, boarding passes, train tickets, local transport tickets, parking tickets, toll tickets (when traveling by car) and upload the files to the e- COST page.

• Submit the Online Travel Reimbursement Request (OTRR). • Send by ordinary mail all receipts according to the first table in original (unless they are electronic) <i>Please, ignore the instruction that you get at the end of the process telling you to send everything to Pietro Govoni</i>	• Submit the Online Travel Reimbursement Request (OTRR). • Send by ordinary mail all receipts according to table 1 in original (unless they are electronic) <i>Please, ignore the instruction that you get at the end of the process telling you to send everything to Pietro Govoni</i>
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rule derogations

- If you are temporarily based at CERN or at an Institute different from your Home Institute for a certain period, to claim for the travel reimbursements from there, you will also have to provide to the address ybscan.secretariat@unimib.it a declaration from your Home Institute and from your Host Institute certifying the situation.
- If you are going to **travel** to or from a **different place** other than that where a meeting is being held and the place where you are residing, or if you are going to ask only **part** of the travel reimbursement, please provide a comparative quote sourced from a print-out from a reputable online travel search engine (Skyscanner, Expedia, Opodo etc.) listing the most economical means of travel close to the dates of the meeting for the expectant journey (the expectant journey being as if the participant travelled from the country where they are residing (as registered on their e- COST profile) to the country where the approved activity is being held and back again). The quotes shall be generated **at least one month before the start date of the meeting and must be a round-trip**. The quotes must show travel prices of the same mode of transport that was actually travelled. The lower of the two amounts (actual and comparative quote) will be reimbursed (see COST Vademecum, 5.1.3, point 5).

TAXI

Please be aware that taxi **can be reimbursed only before 7 a.m. and after 10 p.m.**, when no other means of public transport is available and for up to EUR 80 for the entire travel when the previous conditions have been met. Furthermore its use is limited between the following points:

1. Home to Airport / train station;
2. Airport / train station to meeting venue / hotel;
3. Hotel to meeting venue;
4. Meeting venue to hotel;
5. Meeting venue / hotel to airport / train station;
6. Airport / train station back to home.

PLANE

Please be aware that air fares **cannot exceed EUR 1 200**. Air fares that exceed EUR 1201 require explicit approval from the COST Association, so please let us know as soon as possible before the meeting takes place.

Travel cancellation insurance and luggage insurance cannot be reimbursed.

A) DICHIARAZIONE DEI DATI PERSONALI
(AI SENSI DELL'ART. 46 DEL D.P.R. N. 445 DEL 28.12.2000)

Cognome e nome _____

Nato a _____ in data _____

Residente a _____ Via e n. civico _____

c.a.p. _____ provincia _____ Telefono _____ e-mail _____

Codice fiscale n. _____ P.IVA n. _____

Modalità di pagamento:

Accredito su c/c bancario ☐

Pagamento allo sportello ☐

Coordinate Bancarie IBAN															
	COD	CIN	ABI				CAB				Conto Corrente				
IT															

B) DICHIARAZIONE AI FINI PREVIDENZIALI E FISCALI

Il sottoscritto **dichiara** inoltre:

☐ di svolgere attività di lavoro dipendente presso **ente pubblico (*) / azienda privata**

Nel solo caso di **dipendente pubblico** specificare:

Denominaz. Ente _____

Indirizzo ente _____

☐ di **essere** iscritto all'**albo o elenco professionale** _____

☐ di **essere** iscritto alla **Cassa/ ente previdenziale obbligatorio** _____

☐ di avere aperto la mia posizione Inps Gestione Separata (L. 335/95) presso la Sede _____

☐ di essere titolare di *borsa di studio/dottorato/assegno di ricerca* presso _____

☐ di essere **pensionato** presso la **Cassa previdenziale** _____

☐ di non essere soggetto a contribuzione Inps poiché nel corso dell'anno ho **superato/supererò** il massimale contributivo derivante dalla Gestione Separata

Richiedo inoltre:
☐ l'applicazione **dell'aliquota marginale IRPEF** nella misura del _____ % (**)

☐ l'applicazione delle **detrazioni / Bonus fiscale per reddito da lavoro dipendente o assimilato dal 01/01/2019 al 31/12/2019**
☐ l'applicazione delle **detrazioni per familiari a carico** (richiedere e compilare apposito modulo)

☐ se **residente fiscalmente all'estero** l'applicazione della Convenzione per evitare la doppia imposizione fiscale tra Italia e stato estero di residenza (richiedere e compilare apposito modulo) (***)

Nel caso di titolari di partita IVA (**):**
☐ di svolgere l'incarico conferitomi attingendo alle medesime conoscenze che connotano la mia professione

☐ di essere iscritto alla cassa previdenziale di categoria con obbligo di versamento contributivo pari a _____

☐ indicare regime fiscale _____

Dichiaro di essere informato che i dati personali sopra rilasciati saranno trattati secondo le modalità previste dal D.Lgs. 196/2003 (Codice in materia di protezione dei dati personali) e dal Regolamento UE 2016/679 (Regolamento Generale sulla Protezione dei Dati) e nei limiti delle finalità per cui sono stati rilasciati.

Data _____

FIRMA DEL DICHIARANTE _____

NOTE PER LA COMPILAZIONE:

- (*) I collaboratori che **sono dipendenti da Enti pubblici o Amministrazioni dello Stato**, devono allegare l'autorizzazione a collaborare con l'Università degli Studi di Milano Bicocca, rilasciata dal proprio Ente di appartenenza, secondo quanto disposto dall'art.53 D.Lgs. 165/2001 o in caso di attività che non necessita di preventiva autorizzazione, la comunicazione effettuata alla propria Amministrazione.
NB: I docenti a contratto che hanno già fornito la prescritta autorizzazione all'atto della presentazione della domanda o della stipula del contratto non sono tenuti a presentarla nuovamente.
- (**) Da indicare solo se si intende richiedere un'aliquota superiore a quella del 23% del primo scaglione di reddito.
- (***) I collaboratori fiscalmente residenti all'estero che intendono richiedere l'applicazione di Convenzioni per evitare la doppia imposizione, devono allegare la **dichiarazione/certificazione redatta su apposita modulistica dell'Agenzia delle Entrate debitamente certificata dall'Autorità finanziaria del paese estero di appartenenza**.
Nel caso non si richieda l'applicazione della Convenzione, le somme percepite verranno assoggettate alla ritenuta del 30% a titolo d'imposta.
- (****) **A partire dal 31/03/2015 l'Ateneo potrà accettare e/o pagare esclusivamente fatture elettroniche (le fatture non elettroniche e/o le fatture pro-forma saranno restituite al mittente).**



UNIVERSITA' DEGLI STUDI DI MILANO – BICOCCA

P.za Ateneo Nuovo, 1 – 20126 Milano

Cod. Fiscale. 12621570154

PERSONAL DATA – NON RESIDENT

(IN ACCORDANCE WITH D.P.R. Nr 445/2000, CLAUSE Nr 46)

Surname and Name _____

Place of Birth _____ Date of Birth _____

State _____ Full Address _____

Telephone _____ E-mail _____

ITALIAN TAX IDENTIFICATION NUMBER (compulsory):

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The undersigned:

DECLARES not to reside in Italy for tax purposes;

REQUESTS:

☐

Exemption from Italian tax or application within the limits provided by Conventions for the avoidance of double taxation (see Form and Instructions on the web page:
<https://www.unimib.it/servizi/collaboratori-esterni/modulistica>

☐

Application of 30% automatic tax

UNDERTAKES to inform us of any changes that should occur (lavoroautonomo@unimib.it)

Payment method:

BANK: _____

ADDRESS: _____

(if part of the EU Monetary Union):

BIC/SWIFT CODE _____ IBAN _____

(if outside the EU Monetary Union):

BANK ACCOUNT DETAILS _____

DATE _____

SIGNATURE _____