

## Refund of costs Instahelp

### Informations about recipient

Surname and first name:		Address:	Student-ID:
IBAN		BIC	Phone number:
		Bank	

### Details of the costs to be refunded:

Number:	Receipt number:	Date of consulting session	Amount

Please send the completed form to [info@oeh-mci.at](mailto:info@oeh-mci.at)

**Total:** \_\_\_\_\_

\_\_\_\_\_  
 Date, Signature  
 Applicant

\_\_\_\_\_  
 Date, Signature  
 Authorized signatory

\_\_\_\_\_  
 Date, Signature  
 head of economic affairs