

**OCCASIONAL EMPLOYMENT
RECORD OF THE SERVICES PROVIDED
FOR A SEMINAR/CONFERENCE/
SINGLE TEACHING ASSIGNMENT/CASE STUDY**

€ 2.00 revenue stamp
ONLY for remuneration and/or
reimbursement of expenses
exceeding € 77.47

The undersigned _____
place of birth _____ date of birth _____
resident in _____ prov. _____ address
_____ no. _____ postcode
_____ tax identification Code _____

VAT identification n. _____ following the conferment of the assignment and
provision of services of _____ to carry out the seminar/conference/single teaching
assignment/case study described as follows:

option 1) for which the payment of the total amount of € _____ gross of withholding tax paid by the
recipient has been agreed

option 2) for which the payment of the total amount of € _____ gross of withholding tax paid by the
recipient in addition to the following expenses* travel board accommodation has been agreed

option 3) for which only the reimbursement of the following expenses* travel board
 accommodation has been agreed

declares

that the above mentioned occasional service has been carried out as agreed, autonomously defining the method of
procedure,

and requests

(option 1) the payment of the agreed fee of € _____ gross of withholding tax paid by the recipient.

or

(option 2) the payment of the agreed fee of € _____ as well as reimbursement of the following expenses:

Travel expenses for a total amount of € _____

relative to trips by [*specify the vehicle*] _____ [if travelling using your own vehicle please specify the
type of vehicle, brand, model and fuel, as well as the kilometres travelled. The eligible expense merely refers to the
cost of fuel resulting from the receipts supplied and re-measured according to the kilometres based on ACI tables]:

date _____ from _____ to _____ and return journey € _____

date _____ from _____ to _____ and return journey € _____

Board expenses for a total amount of € _____



meal (date) _____ € _____ c/o _____

meal (date) _____ € _____ c/o _____

Accommodation expenses for a total amount of € _____

no. nights _____ from _____ to _____ c/o hotel _____ + tourist tax € _____

for a total amount (fee + expenses) of € gross of withholding tax paid by the recipient

or

(option 3) the reimbursement of the following expenses:

Travel expenses for a total amount of € _____

relative to trips by [*specify the vehicle*] _____ [if travelling using your own vehicle please specify the type of vehicle, brand, model and fuel, as well as the kilometres travelled. The eligible expense merely refers to the cost of fuel resulting from the receipts supplied and re-measured according to the kilometres based on ACI tables]:

date _____ from _____ to _____ and return journey € _____

date _____ from _____ to _____ and return journey € _____

Board expenses for a total amount of € _____

meal (date) _____ € _____ c/o _____

meal (date) _____ € _____ c/o _____

Accommodation expenses for a total amount of € _____

no. nights _____ from _____ to _____ c/o hotel _____ + tourist tax € _____

for a total amount of € _____

The undersigned declares under his/her responsibility,

that he/she has not received nor will receive as such any other reimbursement of the above reported expenses.

The undersigned attaches to the present declaration the relevant documentation providing evidence of the expenses.

Florence, date _____

The contractor

* Expenses as well as fee are taxed pursuant to art. 25 D.P.R. no. 600 of 1973. See also resolution no. 49/E of 11 July 2013 – taxation of expense reimbursements by the Italian Revenue Agency.

For Office use only

The reimbursement of the expenses incurred for an amount of € _____ gross of withholding tax paid by the recipient is approved (€ _____ inclusive of charges borne by the Administration).

HEAD OF THE DEPARTMENT

FUNDS ASSIGNEE

Proj. _____

Prof. _____

Prof. _____



