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| **Request Form for the Reimbursement of Cell Phone Expenses**  **(Internet, Calls, SMS)**  ***(For faculty cellphone expenses in Israel only)*** | |
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| Name: | Department: |
| Rank: | Internal Telephone Number: |
| I.D.: |  |
| From (date): | to (date): |
|  |  |
| Reimbursement of expenses is according to invoices, which should be uploaded with this form.  Please mark the amount on each invoice so it is clear to the finance department.  The maximum amount for reimbursement is 50 NIS (including VAT) per month. | |
| Amount: | Account # at RA\*: |
| \* The expenses can be reimbursed only from Laboratory Budgets (תקציבי מעבדות), Chair Budgets (קתדרה) and grants with flexible budgets (תקציבים גמישים). Internal funding, Hechzarim accounts and donation funds cannot be used for the reimbursement of cellphone expenses. | |
| **Declaration:**  **I declare that I do not receive reimbursement for cellphone expenses from another source (such as reimbursement for cellphone expenses for senior position holders at the Technion).** | |
| Signature: | Date: |
|  | |
| Approval for use of the budget by the Research Authority Research Coordinator: | |
| Name: | |
| Signature: | Date: |
| Remarks: | |