Regeneron India Non-Employee Expense Reimbursement Declaration Form

REGENERON
science to medicine®

HCP (Health Care Professional) [ ] Yes [ ] No

[ ] Candidate   [ ] Other (Please Provide Description)

[ ] Honorarium/Guest Speaker   [ ] Investigator Meeting

For travel only: In connection with my travel from _____ to _____, the expenses incurred by me are as follows:

Dates	Description		Mileage		Air/Rail Travel	Hotel	Car Rental/Taxi Service	Personal Meals	Other (Parking, tolls, etc.)
		Miles	Amount						
Total in INR			INR -		INR -	INR -	INR -	INR -	INR -

Declaration

I hereby confirm that –
1.I have attached original and correct supporting receipts/ documentation for all expenses, irrespective of the amounts involved.
2.All amounts claimed relate to legitimate business expenses and does not relate to personal in nature.
3.No amounts have been claimed in duplicate, either through multiple expense reports or through multiple modes.
4.All expenses pertain to my travel, are within the permissible limits and I have read, understood and ensured compliance with the Regeneron Non-employee Travel Policy and have approval in advance from Requestor.
5.All expenses have been claimed within 30 days of incurring the same.

Total Expenses Due:	*INR* -
Total Air/Rail	*INR* -
Total Mileage	*INR* -
Total Hotel	*INR* -
Total Rental/Taxi	*INR* -
Total Meals	*INR* -
Total Other	*INR* -

Signature of the Non-Employee [_____]

Non-Employee's Name: [_____]   Permanent Account Number [_____]

Mailing Address: [_____]

Email Address: [_____]

Internal Use Only

Authorized Signature: [_____]   Date [_____]

Cost Center [_____]   Project Code [_____]   Location [_____]

An HCP is defined as any health care provider, person or entity that can: Purchase, Prescribe, Recommend, Refer and/or Arrange for the purchase, sale, or formulary placement. In addition to these examples, to satisfy statutory reporting, requirements, Regeneron personal are required to include and list the HCP office staff as an "HCP".