

Expense Reimbursement Form

Lilly

To be completed by Meeting Participant in BLOCK capitals or electronically. If completed electronically, the form must be printed and a hardcopy signed. For further guidance how to fill in this form, please refer to the Thank you letter email.

Country of Residence (please select before printing)	France	Date & Location of Meeting	GZBO Investigator Meeting EMEA 13- 18 October 2024, Amsterdam
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Participant Name	NIORT Noémie
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Participant Address	65 avenue Georges Clémenceau 33 400 Talence - appartement n°2
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Local Transportation:

0,5 EUR/km, max amount of 300 EUR, NO GASOLINE

No local transportation but only the parking price in FRANCE to let my car
next to the airport

EUR 38,500

EUR

EUR

x

EUR =

Meals are not eligible for reimbursement

EUR

Total amount: EUR 38,500

BANK Details for payment

Bank name	La banque postale
Account Holder	Niort Noémie
IBAN/Account details	FR43 2004 1010 1107 5213 9B03 239
BIC/SWIFT	PSSTFRPPNTE
TAX ID- RPPS number or Siret/Siren	NA

If none, please state N/A

Lilly is unable to reimburse any personal expenses, such as mobile charges, minibar, or entertainment.

Please ensure that all reasonable expenses, except for mileage claims, are accompanied by ORIGINAL RECEIPTS. It is acceptable to scan and email receipts.

PLEASE RETURN this form with your scanned receipts to the email address provided below. Your expenses will only be paid if this claim is satisfactorily completed, signed, and returned within 90 days of the meeting date.

lilly_france_cms@lilly.com

Privacy Notice and Consent

I confirm to the best of my knowledge and belief, all the information provided above is true and correct.

I hereby give my consent for the use of my personal information, which includes my Basic Personal Details (Name, Address); Financial Information (Bank Account Information); Personal Contact Information (Email Address); and Travel & Expense Details (expense details), for the administration of our business processes, namely the Reimbursement of Expenses, in accordance with the conditions provided in the Privacy Statement below. Your PI may be transferred and processed by and between Eli Lilly and Company, its affiliates and wholly-owned subsidiaries and Third parties world wide.

For more information about Lilly's privacy practices, please refer to the Privacy Statement at

[Privacy notice](#)[France](#)

I acknowledge that I have received and had the opportunity to review the full privacy policy concerning how my personal information will be used by Lilly, what my rights are with respect to such processing, and have received information on how to contact Lilly should I have any questions regarding such processing. I understand that I have the right to withdraw my consent at any time by contacting Lilly using the information provided in the Privacy Statement. Withdrawal of consent does not affect the lawfulness of processing based on consent before its withdrawal.

NIORT NOEMIE

Name (printed)

NIORT

Signature

25 OCT 2024

Date

Lilly Administrative Information - FOR OFFICE USE ONLY

Prism ID:	P02151877200	Cost Element	4870	Cost Centre	2000196
Mercury Meeting ID:	M-M252074NL24				



RELEVÉ D'IDENTITÉ BANCAIRE

RIB - Identifiant national de compte

ÉTABLISSEMENT	GUICHET	N° COMPTE	CLÉ RIB	DOMICILIATION
20041	01011	0752139B032	39	LA BANQUE POSTALE NANTES CENTRE FINANCIER

IBAN - Identifiant international de compte

FR43 2004 1010 1107 5213 9B03 239

BIC - Identifiant international de l'établissement

P S S T F R P N T E

Titulaire du compte

MLE NIORT NOEMIE
55 CHEMIN DE LA RUELLÉ
17100 LES GONDS

R E C U

--- JUSTIFICATIF ---

Aéroport de Bordeaux
www.bordeaux.aeroport.fr
33700 Merignac

Ticket parking 207375
Entrée 3 P2
Entrée 17.10.2024 05:00:53



02996107110011234291180530



CONSERVEZ CE TICKET SUR VOUS
POUR PAIEMENT AUX CAISSES AUTOMATIQUES

Recu no 9711/0601/00601 18.10/24 22h59

010100 Paiem. T. d'entrée 38,50 EUR
17/10/24 05:00 - 18/10/24 22:59
Durée stat.: 1 Jours, 17:59
02996107110011234291180530??

Total 38,50 EUR

Credit Visa 38,50 EUR

TVA 20,00 % 6,42 EUR

CARTE BANCAIRE

A0000000421010

CB

1e 18/10/24 a 22:59:25

AEROPORT BORDEA

33MERIGNAC AUTO

4576954

30004

48760720200024

*****3704

BA9811E53FC4DDA4

061 001 289903

C

No AUTO :

MONTANT REEL

38,50 EUR

DEBIT

TICKET CLIENT

A CONSERVER

*****Paiement par carte a contact*****