

NOTE FOR THE ATTENTION OF ALL PARTICIPANTS IN THE COST 272 ACTION

INVITATION
TO THE 4th MANAGEMENT COMMITTEE MEETING

Dear Colleagues,

On behalf of Prof. Gérard Maral, Chairman of the COST272 Action, I have the pleasure to officially invite you to the 4th Management Committee meeting for COST 272, which will be held in Surrey, United Kingdom on the 5th and 6th of December 2002.

Please don't forget to confirm your attendance by e-mail to the COST272 Secretariat and to bring the reimbursement form (attached to this invitation) at the meeting [Note: personal details and bank details don't have to be provided if unchanged].

If you have any problems or questions about the meeting, please contact:

COST272 Secretariat: Laurent Franck
Tel: (+33 5) 61 55 98 20
Fax: (+33 5) 61 55 98 08
e-mail: Laurent.Franck@laas.fr

Looking forward to seeing you in Surrey.

Yours Sincerely,

Laurent Franck
COST272 Secretariat

**4th Management Committee Meeting
of the COST 272 Action**

**Surrey Space Centre
BA Building, room E13/15, First floor
University of Surrey, Guilford, UK**

Starting time: 10.00 AM (Thursday December 5)

Provisional agenda

Thursday, December 5 – 10:00

Opening and administrative matters, 10:00 – 10:30

Opening of the meeting, meeting agenda, minutes approval, budget discussion

B. Evans, "Overview of the CCSR activities"

Network of Excellence discussion, 10:30 – 12:00

R. Rumeau, "Open Sky Meetings over Europe: Rationale & Basic Concepts"

Lunch, 12:00 – 13:30

Network of Excellence discussion (cont'd), 13:30 – 15:30

Technical presentations, 15:30 – 18:30

M. Werner, "Satellite-Based Aeronautical Communications: Status Update of Ongoing Research"

M. Howarth, "Security systems for multicast data transfer over satellite"

L. Liang, "Multicast deployment and QoS measurement in ICEBERGS"

K. Narenthiran, "Radio Interface design for MBMS services via S-UMTS: The SATIN Project"

M. Karaliopoulos, "The interaction of BoD and TCP in broadband satellite networks"

Dinner

Friday December 6 – 09 :00

Technical presentations (cont'd), 09:00 – 10:30

K. Narenthiran, "MoDiS: the S-DMB experimental platform"

F.J. González-Castaño, "Satellite-to-WLAN video transcoding"

L. S. Ronga, "CNIT Ka Skyplex Satellite Network"

Organisation of a joint workshop w/ COST280, 10:30 – 12:00

Guest speaker: Dr Misha Filip

Lunch, 12:00 – 13:30

Organisation of joint workshop with COST280 (cont'd), 13:30 – 14:30

Technical presentations, 14:30 – 16:30

N. Celandroni, Franco Davoli, Erina Ferro, "Dynamic Resource Allocation in a Multiservice Satellite Network with Fading"

N. Celandroni, F. Davoli, E. Ferro, S. Vignola, S. Zappatore, A. Zinicola, "Quality of Service Measurements of Video Encoded Sequences over an Emulated Ka Band Satellite Environment"

L.S. Ronga and T. Pecorella, "MuDiSP3 and NePSing simulation environments: link and network level C++ simulation engine for satellite systems"

Meeting closing, 16:30 – 17:00

**APPLICATION FOR REIMBURSEMENT OF EXPENSES
 EXPERT**

Box I INSTRUCTIONS

- To obtain reimbursement of your expenses, you **must** complete box II and the bank account No. + the name of the beneficiary on the back of this form. The rest of this document must be completed if :
 - this is your first application for reimbursement
 - there has been a change in information provided previously (address, bank account, organization, etc.)
- Box II should show your travelling expenses, in the currency in which they were incurred, the form(s) of transport used, and your place of departure and arrival.
- You must also provide a copy of your travel tickets, showing the cost of the ticket, to be attached to this form.

THE DOCUMENT IS ONLY VALID IF SIGNED BY THE EXPERT (on both sides) AND THE MEETING SECRETARY

Box II TO BE COMPLETED BY THE EXPERT (in block letters)

R

EXPERT'S identification No.

Reserved for EC use

Surname First Name

Please note that unless you mention the bank account No. and the name of the beneficiary on the reverse side of this form, we may not be able to reimburse you for the costs listed below

Form of transport used:

A) Air (Economy Class) (1)
 (A)PEX YES/NO

B) Train/Boat

- Supplements (1)
- Sleeper supplement (2)

C) Car

C1) Private car
 Registration No. KM

C2) Private car of another EXPERT
 Registration No. KM

C3) Official car
 Registration No. KM

TAXI FARES WILL NOT BE REIMBURSED

	PLACE		Price	Currency
	of departure	of arrival		
outward/				
return				
outward/				
return				

I declare that my: - travel expenses *
 - daily allowances *
 will **NOT BE MET** by another organisation.
 * *delete as appropriate*

.....
 Signature of expert

Box III TO BE COMPLETED BY THE MEETING SECRETARY

This is to certify that the EXPERT took part fromto.....in the meeting arranged by DG XII held at and that the expenses claimed correspond to the supporting documents.

PRIVATE GOVERNMENT expert

MEETING SECRETARY

Name:

Title of the meeting

Signature:

Date:

(1) upon presentation of tickets (2) on the basis of double occupancy

You must indicate the bank account No. and the name of the account holder even if you have already completed this form in the past.

Personal details of the expert:

Surname:

First Name:

Nationality:

Organization/Institute:

Department:

Address (street & No.):

Post Code/City/Country:

Telephone number: Fax No.

E-mail:

Bank details for reimbursement:

1) **Name of account holder**

2) **FULL address of account holder:**

(need not to be filled in if the address of the account holder is the same as above. If the account is in the name of the expert, the private address is required).

Address (street, number):

Locality & post code:

3) **FULL address of the bank: (Please justify if data requested below is not provided in details)**

Name :

Address (street, number):

Locality & post code :

4) **Structure of bank account:**

Belgique/Belgie _____ - _____ - _____

Danmark RC _____ N° _____

Deutschland BLZ _____ N° _____

Greece _____ - _____ - _____

España CE _____ CO _____ DC _____ N° _____

France CE _____ CG _____ N° _____ RIB _____

Ireland/UK SC _____ N° _____

Italia ABI _____ CAB _____ N° _____

Luxembourg _____ - _____ - _____

Nederland _____ - _____ - _____

Österreich BLZ _____ N° _____

Portugal CE _____ CA _____ N° _____ CD _____

Suomi/Finland PVN _____ N° _____

Sverige BCN _____ N° _____

Others _____ - _____ - _____

...../...../.....

DATE SIGNATURE OF EXPERT