

RELOCATION EXPENSE REIMBURSEMENT FORM

Name (Ple	ease Print)			— Den	artment			Date		
								Date		
Moving fi	rom:			to:						
time fac move in expense	culty member order to access over \$1,50 ege will be in	first \$1,500 cms and employeept a position 0 up to a maximulated in employeept and the control of the control o	ees hired at to with the col imum of \$3,0	the Interm lege. In ac 000 for an	nediate Ad ddition, the ny one indi	ministrato e college ividual or	or category pays one-l family. M	or highen alf of the loving ex	er who must e excess of penses pai	st such d by
form, ald reimburs belongir	ong with orig	nit this form, a ginal receipts, g expenses. In eling (<i>includin</i> allowable:	to Human R general, you	Resource S a may be	Services. I reimburse	Dickinson d for the c	follows II	RS guidelying your	lines regar household	ding
The fromAny persTheThe dayThe	cost of pack n your formed costs of cor- conal effects. cost of shipp cost of storic your things a cost of trans	ne standard ming, crating, a rhome to you necting or disting your car and insuring are moved from portation and your new home	nd transport or new home connecting u and your hou g household m your form lodging for	utilities be usehold pe belongin er home a	ecause you ets to your gs within a and before	new homany period	ng househ e. d of 30 cor delivered t	nold good	s, applianc days after w home.	ees, or
Date of Expense	Brief Description of Expense		Total Miles	Total Mileage	Packing/ Crating/	Utilities	Shipping	Storage	Travel/ Lodging	
					Moving	d T (1) (1)	les cell – Total l	Mileaga:''		
					Enter miles ii	n the Total Mi	les cell – Total	Mileage will a	luto calculate	+
Totals										
Do not i	include activ	ity on this for nbursement w	m that has l	been char	ged to a c	ollege cre			original re	ceipts
	Γ	For Office Use Only:								
		Approved by: Amount: \$								
		Pay Period Reimbursed:								
		IRS standard	mileage rate	e for mov	ing:					