EMPLOYEE MOVING EXPENSE REPORT

NAME: ________________________________

ALLOWED TRIP(S) TO ARRANGE HOUSING:

DATE: ________________

AIRFARE: ____________

RENTAL CAR: ____________

HOTEL: ____________

TOTAL: ____________

MOVING EXPENSES ONLY:

MOVING SERVICE: ____________

MILEAGE (PERSONAL CAR): ____________ MILES X 0.24 = ____________

RATE TOTAL

LODGING DURING TRIP: ____________

MOVING SUPPLIES (BOXES, TAPE, ETC): ____________

TOTAL: ____________

PLEASE ATTACH ALL RECEIPTS

OFFICE USE ONLY: % OF TOTAL REIMB: _________