

Employee Name:	Employee PIDM:
Position/Title:	Date of Hire:
Moving From:	Moving To:
Date of Move:	Email Address:

I request reimbursement for the following items:

Moving Van/Truck rental* _____

Mileage _____ miles x \$0.21 (2024 IRS _____

Rate) Lodging (trip must equal or exceed 400 miles) _____

Other expenses: Please itemize. _____

TOTAL EXPENSES: _____

Attach **ALL original detailed receipts**. Proof of payment for moving expenses is required.

Org Code: _____ **Account:** 627130

Signature of Employee

Date

Signature of VP/Dean

Date

Approval of Controller

Date