

The College of William and Mary

Employee Moving and Relocation Expense Summary Form

Employee Number _____
 Employee Name _____
 Address _____

Date Employed _____
 Is this the Final Reimbursement YES _____ NO _____

Date Tenure Agreement Signed: _____

Type of Moving Expenses	Total This Report	Total All Prior Reimbursements	Cumulative Total
TAXABLE EXPENSES			
Pre-move travel and lodging payments excluding meals: Number of Trips: Number of nights			
Temporary quarters travel and lodging payments From: To:			
Total meal payments for pre-move house hunting and temporary quarters			
Total Meal payments incurred during travel from old to new home			
Travel - Mileage in excess of IRS allowable rate			
Qualified expenses of buying a new home			
Qualified expenses of selling old home			
Other payments (Specify on attached sheet)			
Subtotal Taxable Expenses			
NON-TAXABLE EXPENSES			
Transportation - Common Carrier			
Transportation other than Common Carrier (moving vehicle rental) Storage Max 30 days			
Storage (max 30 days) Date From: To:			
Travel and lodging payments excluding meals for move from old to new home (mileage at IRS allowable rate)			
Subtotal Non-Taxable Expenses			
Grand Total			

Certification Statements: I certify that the expenses were incurred by me while moving and relocating at the request of the above cited agency of the Commonwealth of Virginia.

Signature of Employee: _____ Date: _____

I certify that the expenses were incurred in an employee relocation requested by the Commonwealth of Virginia and do not exceed the requirements set forth in the DOA moving and relocation expense regulations. Written approval for reimbursement above normal established limits is attached.

Signature of Agency Head: _____ Date: _____

Print Name: _____ Title: _____