## MOVING EXPENSE ITEMIZATION

Name ____________________________  
Date Submitted ________________________  
Page ______ of ___________  
Moved from ______________________ to ______________________  

City/State                        City/State

<table>
<thead>
<tr>
<th>RECEIPT NO.</th>
<th>NAME OF VENDOR/COMPANY</th>
<th>PURPOSE/DESCRIPTION/NUMBER OF MILES</th>
<th>AMOUNT</th>
<th>FOR OFFICE USE ONLY</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Transport of Goods²</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Taxable</td>
</tr>
</tbody>
</table>

**TOTAL REIMBURSEMENT REQUESTED:**

Notes:
1. Please number your receipts in the upper right-hand corner to correspond with numbers in Column 1.
2. Transportation of Goods includes moving van, rental truck and gas for rental truck. All are non-taxable.
3. Travel includes hotel/airfare for relocation trip and mileage for personal vehicle. Mileage is reimbursed at 40½¢ per mile, 20¢ of which is taxable.
4. Meals are taxable as are all expenses for a house-hunting trip.

Return completed form with attached receipts to the Department of Human Resources, Campus Box 6108. Your check will be mailed to your campus box.