

<b>The University of Mississippi Employee Moving Expense Reimbursement Voucher</b>	Employee Name: _____	Date: _____
	Employee Signature: _____	Personnel Number: _____

  

<u>Local Mailing Address:</u>	Campus Department Name: _____
Street: _____	Phone Extension or Email: _____
City: _____	State: _____ Zip: _____

Please reimburse the above employee for moving expenses incurred from (city and state) \_\_\_\_\_ to accept employment with the University of Mississippi. Inclusive dates of the move were from \_\_\_\_\_ to \_\_\_\_\_  
Receipts are attached to the back of this form and the expenses are categorized and listed in the spaces provided below.

**DOCUMENTATION OF MOVING EXPENSES**

<b>A. Transportation of Household Goods</b>					<b>Totals</b>
1.	Payment for truck rental (include dolly and pads)				
2.	Casual labor to load/unload rental truck				
3.	Gasoline for rental truck				
4.	Payment to professional movers				
<b>Total Costs for Transportation of Household Goods</b>					<b>0.00</b>

<b>B. Expenses of Moving from Old to New Home</b>					
5.	Mileage (see footnote):				
	From	To	Miles	Rate	
	a.				0.00
	b.				0.00
	c.				0.00
6.	Lodging en route				
7.	Meals en route				
<b>Total Costs for Expenses of Moving from Old to New Home</b>					<b>0.00</b>

<b>C. Pre-move House Hunting Expenses</b>					
8.	Mileage (see footnote):				
	From	To	Miles	Rate	
	a.				0.00
	b.				0.00
	c.				0.00
9.	Lodging en route				
10.	Meals en route				
<b>Total Costs for Pre-move House Hunting Expenses</b>					<b>0.00</b>

<b>D. Miscellaneous Payments (list all other payments here)</b>					
11.	_____				
12.	_____				
<b>Total Costs for Miscellaneous Payments</b>					<b>0.00</b>

**TOTAL MOVING EXPENSE PAYMENT 0.00**

**DISTRIBUTION OF TOTAL MOVING EXPENSE PAYMENT**

Fund	G/L Code	Account	Date	Signature of Signatory Officer	Amount
	55865				
	55865				
	55865				

FOOTNOTE: If the moving agreement called for reimbursement of actual gasoline expenses in lieu of standard mileage, please total all gasoline receipts and enter amount on line B.5.a. or line C.8.a., whichever applies. Attach receipts to the back of this form.

CHECK FIGURE

0.00

This balance should be zero if you have properly distributed the total moving expense payments to University Accounts