

Relocation Expense Reimbursement

Name Employee ID

Department Date

Relocating From:

Address

City State Zip Code

Relocating To:

Address

City State Zip Code

My new residence is more than 50 miles from my previous residence

Explanation of itinerary and corresponding receipts submitted (attach additional page(s) if more space is needed):

Purpose	Expenses	Miles	Amount	Date (From)	Date (To)
	Airfare				
	Enter # Miles Driven				
	Car Rental				
	Fuel - Car Rental				
	Truck Rental				
	Fuel - Truck Rental				
	Parking/Tolls				
	Taxis				
	Metra/CTA/RTA				
	Lodging				
	Meals				
	Postage				
	Moving Supplies				
	Moving Company				
	Storage (within 30 Days of the move)				
Total Expenses					

Signatures/Approvals:

Employee Date

Budget Manager Date

Approving VP/Dean Date

Completed reimbursement forms, offer letters (indicating approved relocation assistance amount), and all original receipts must be submitted to the Vice President's or Dean's Office of your Department or College. The VP's/Dean's Office will forward this information to Payroll Services for processing.