

EMPLOYEE REQUEST FOR REIMBURSEMENT OF RELOCATION EXPENSES

EMPLOYEE INFORMATION

Employee Name _____ Title _____
 Department _____ Date Moving Agreement Signed _____
 OneUSG Connect Employee ID _____ OneUSG Connect Employee Record _____

RELOCATION INFORMATION

Former Primary Residence: _____ New Primary Residence: _____
 Street _____ Street _____
 City/Town _____ City/Town _____

Maximum Reimbursement Allowed (Per Relocation and Moving Expense Agreement) \$ _____
 Is this the Final Reimbursement Request? _____
 Chartstring/Speedtype _____

EMPLOYEE CERTIFICATION AND AGREEMENT

I certify the expenses listed above were incurred by me for the purpose of personal relocation and moving at the request of the University of Georgia and in accordance with the terms agreed upon in the Relocation and Moving Expense Agreement.

 Employee Signature Date

The expenses shown on this voucher have been reviewed for accuracy and conformity with State Of Georgia and University relocation reimbursement regulations and are considered to be reasonable and proper.

 Department Head Date

**Per UGA Travel Regulations, a written justification must be submitted for any expenses in excess of per diem rates. Please refer to the UGA Travel Regulations at: <http://policies.uga.edu/Travel/Employee-Travel-Effective-January-1-2015-Present/> for specific guidelines and per diem rates.*