

Relocation Reimbursement
Request Form

SECTION 1: PERSONAL INFORMATION

Employee Name

Mailing Address

Legal Spouse/Partner (if applicable)

Legal Dependent child(ren), name(s) and age(s) over the age of 1 (if applicable)

Reason for completing form (complete a separate form for each reason):

☐ Move ☐ House Hunting ☐ Temporary Housing

SECTION 2: EXPENSES

| | | | | | | |
|--|------|--|----|--|--|--------|
| Day/Date | | | | | | Total |
| Shipping Household | | | | | | |
| Moving Company | | | | | | |
| Rental Truck | | | | | | |
| UPS/Other | | | | | | |
| U.S. Mail | | | | | | |
| Travel Points | from | | to | | | , Ohio |
| Expenses | | | | | | |
| Mileage or | | | | For 1/1/25-12/31/25 miles @ \$.21/mi = | | |
| Gasoline | | | | | | |
| Personal Auto(s) | | | | | | |
| Rental Truck | | | | | | |
| Tolls | | | | | | |
| Airfare (Coach only) | | | | | | |
| Rental Car (Economy only) | | | | | | |
| Taxi/Limousine | | | | | | |
| Parking | | | | | | |
| Packing Supplies | | | | | | |
| Other | | | | | | |
| Lodging <i>Follow current federal per diem rates for city involved.</i> | | | | | | |
| | | | | | | |
| Meals <i>Maximum : current federal per diem rates. Alcoholic beverages and tips are not reimbursable.</i> | | | | | | |
| Breakfast | | | | | | |
| Lunch | | | | | | |
| Dinner | | | | | | |

Additional Expenses (list each item and amount)

Note: Charges for labor are to be receipted and cannot be reimbursed to members of the immediate family.

TOTAL