

Pittsburg State University Employee Moving Expense Reimbursement Form

Business Office • Room 110, Russ Hall • Phone: 620-235-4157

Step 1: Employee Information:

Name: _____ PSU Employee ID#: _____ Last 4 digits of Employee SSN: _____

Total Moving Expense Reimbursement to be issued with payroll check \$ _____
NOTE: Amount must be less than or equal to amount calculated in Step 3 below.

Step 2: Written Agreement: Moving expenses may only be paid after the employee has completed Form DA-22 Moving Expense Agreement, and it has been signed by the appropriate designated official. Please attach the **original** approved DA-22 form.

Step 3: Reimbursement Amount: See the [Employee Moving Expense Policy](#) for reimbursement expense calculation details. Receipts or detail documentation should be attached for each expense item listed.

Reimbursement Amount by Expense Item:

_____	Moving Company	_____	Mileage (Attach MapQuest)	_____	Self-Move Container
_____	Moving Truck Fuel	_____	Car Rental	_____	Lodging
_____	Moving Truck Rental	_____	Car Rental Fuel	_____	Airfare
_____	Packing Material	_____	Storage	_____	Parking
_____	Meals (Attach M&IE Sheet)	_____	Other	_____	
_____ TOTAL All Reimbursement Items					

Step 4: Funding: All Employee reimbursed moving expenses must be funded with private PSU Foundation funds. Because payroll cannot be processed directly from Foundation funds, reimbursements will be processed through a state funded clearing as listed below and reimbursed by the specified PSU Foundation funding.

Payroll Funding: 1241.4210305.511100.0.0.0.0 **Payroll Code:** MVT

PSU Foundation Reimbursement:

Fund	Cost Center	Account	Dept Cost Center	Dept Account	Amount
		76602P			\$
		76602P			\$
		76602P			\$

NOTE: This form will serve as the Transfer Request from PSU Foundation funding to reimburse the state payroll clearing.

Step 5: Attachments:

- DA-22 Moving Expense Agreement (original signed form)
- Three firm bids obtained from commercial carriers (Moving Company Only)
- Bill of lading and receipts (Moving Company Only)
- All other moving expense receipts
- M&IE worksheet (Meals)
- MapQuest (Mileage)

Step 6: Submit this form with all attachments to the Business Office

Employee Signature: _____ Date: _____

Business Office Audit/Date: _____	Routing: DA-22	Original to President's Office
Notes:	Reimbursement Form & Attachments:	Copy to Payroll for Payment
		Original Maintained in Business Office