



**MOVING EXPENSES SUPPORT FORM**  
**For Expenses Reimbursed by Penn State**  
**(Keep a copy for your records and submit)**

Non-PO Invoice Doc. # \_\_\_\_\_

Name: \_\_\_\_\_ PSU-ID: \_\_\_\_\_

Moving From: \_\_\_\_\_ Moving To: \_\_\_\_\_

	<u>Amount</u>
A. Transportation of Household Goods and Personal Effects (Moving van, truck rental, cars, supplies, tolls, etc.)	
Amount paid to you	_____
Amount paid to 3rd party	_____
<input type="checkbox"/> Check box if move is less than 50 miles further than current commute	

B. Travel & Lodging Expenses for moving from old to new home

    Depart Date \_\_\_\_\_ Arrival Date \_\_\_\_\_

    Lodging Exp: # of nights \_\_\_\_\_

    Personal Auto Mileage \_\_\_\_\_ @ .22 cents/miles

    Meals \_\_\_\_\_

    Other form of transportation (please specify-air, car rental) \_\_\_\_\_

C. Storage Costs of Household & Personal Effects (up to 30 days)  
    from \_\_\_\_\_ to \_\_\_\_\_

D. Temporary Housing Expenses (up to 30 days)  
    from \_\_\_\_\_ to \_\_\_\_\_

E. Notes:

**Total Paid to Employee** \_\_\_\_\_

**Total Paid to 3rd Party** \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Receipts are required for all reimbursed expenses, except personal mileage.