



MOVING EXPENSE REPORT

Lake Region Conference
 8517 S. State St., Chicago, IL 60619-5697
 Phone (773) 846-2661

Name _____ Date _____

Address _____

City _____ State _____ Zip _____

One-way miles from _____ to _____ = _____ mi. x \$.43 = \$ _____

One-way miles from _____ to _____ = _____ mi. x \$.43 = \$ _____

Tolls, parking, fares, other _____ (receipts required) \$ _____

Per diem (days) _____ x \$46 (For employee only) \$ _____

Per diem (days) _____ x \$23 (For spouse only) \$ _____

Per diem (days) _____ x \$23 (For children only) _____ x # of children \$ _____

of days rate per day

Motel – number of nights _____ * Motel bill (folio) is required \$ _____

Other (explain) _____ (receipts required) \$ _____

Duplicate automobile registration and excise tax/sales tax:

Duplicate excise tax/sales tax \$ _____

Auto #1 registration \$ _____

Auto #2 registration \$ _____

Moving Flat Allowance (for amount see policy on reverse side) \$ _____

TOTAL \$ _____

FOR OFFICE USE ONLY

Authorized by _____ Date _____ Employee # _____

| <u>Code</u> | <u>Description</u> | <u>Amount</u> |
|--------------|---|---------------|
| 10500 | Moving – Taxable (Self) | \$ _____ |
| 11500 | Moving – Non-taxable (Traveling) | \$ _____ |
| 41033 | Moving Company - 3 rd Party NT | \$ _____ |
| 40033 | Moving Company – Taxable - Retiree | \$ _____ |
| 10510 | Moving – Taxable (Reg./Lic./H.A.) | \$ _____ |