

MOVING EXPENSE REIMBURSEMENT FORM

Revised 2012

Central Texas Conference
464 Bailey Avenue, Fort Worth, Texas 76107-2124,
(817) 877-5222 (800) 460-8622 817-338-4541 fax

Instructions:

- ◆ Complete Option **1 or 2** and return within **60 days** of effective date of appointment.
- ◆ Keep a copy of the form for your records.
- ◆ Mail this form, all receipts, and an adding machine tape or detailed list of expenses to the Conference Treasurer.

Name _____ Date of Move _____

Address _____

City _____ State _____ Zip _____

Telephone (cell) _____ (hm) _____ (wk) _____

Email Address: _____

Moving From (Charge/City) _____

Moving To (Charge/City) _____

OPTION 1. SELF MOVE: *Total receipts plus bonus up to a maximum \$300 with the grand total reimbursement not to exceed \$1,000 from the Conference. Proper documentation of receipts for the cost of truck/trailer, gasoline, and packing supplies must be submitted to the Conference Treasurer before receiving reimbursement. DO NOT include receipts for meals, lodging, temporary storage, or any moving equipment such as dollies, trailer hitches, rope, tie-downs, locks, or any other moving hardware.*

All Reimbursable expenses \$ _____

Add: Miles one way between charges _____ X \$2.00/ mile ... _____

Total Cost of Self Move \$ _____

Add: Bonus – up to \$300.00..... _____

SELF MOVE REIMBURSEMENT (\$1,000 maximum) \$ _____ 400-58500

OPTION 2. COMMERCIAL MOVE: *The Conference will pay a maximum of \$1,500 of actual moving expense. The receiving charge will be responsible for up to \$500.00 above the Conference coverage. The balance will be the responsibility of the pastor.*

Moving Company Paid Invoice \$ _____

Other expenses (boxes, tape, etc.) _____

Total Cost of Commercial Move \$ _____

Conference (maximum of \$1,500) \$ _____ 400-58500

Less: Receiving Charge (maximum of \$500) _____

Balance: (Pastor's responsibility) \$ _____

Submitted by _____ Pastor _____ Date _____

Approved by _____ Conference Treasurer _____ Date _____