**The University of Texas at El Paso**

**Moving Expense Reimbursement Form**

Please complete a separate form for each individual for which reimbursement of moving expenses is requested. Forward completed form with indicated attachments to the UTEP Payroll Office located in the University Towers Suite 502. For questions please call the UTEP Payroll Office at (915) 747-5109.

**1. Employee Information**:

Employee Name:

Employee ID:

Employee Signature:

**2. Department Information:**

Department Name:

Department Contact Name: Ext.:

Department Account Number(s) to charge: Amount: $

 *(Sub Account should be 20 or 51)*

 Amount: $

 Amount: $

Account Authorized Signatory (Administrator):

Print Name:

Signature:

**3. Please attach the following items**:

1. Copy of employees official offer letter
* Must have appropriate Vice President approval
1. Original receipts
* No photocopies will be accepted

**4. Direct Vendor Payment**

1. Purchase Order Number or Department Requisition:

*All moving expenses incurred on or after January 1, 2018, whether reimbursed to an individual or paid to a vendor on behalf of an individual, are taxable income to the individual*.