GLOBAL MOBILITY RELOCATION EXPENSE WORKSHEET

RELOCATION TRAVEL & SETTLING-IN EXPENSE REPORT

EMPLOYEE NAME		EMPLOYEE ID	
JOB TITLE		DEPARTMENT	
ORIGIN CITY/COUNTRY		DESTINATION CITY/COUNTRY	
DEPARTURE DATE		ARRIVAL DATE	
RELOCATION TYPE		COST CENTER / PROJECT CODE	

1. PRE-DEPARTURE & TRAVEL EXPENSES

EXPENSE CATEGORY / DESCRIPTION	DATE	PAYMENT METHOD	RECEIPT AMT (ORIGINAL)	AMOUNT (USD)
Visa, Passport & Consul Fees				
Pre-Departure Travel / House Hunting				
Airfare / Final Transit Tickets				
En-Route Lodging				
En-Route Meals & Incidentals				
Ground Transportation (Taxis, Tolls, Mileage)				
Subtotal - Pre-Departure & Travel				

2. MOVING & STORAGE EXPENSES

EXPENSE CATEGORY / DESCRIPTION	DATE	VENDOR / PROVIDER	INVOICE NO.	AMOUNT (USD)
Household Goods Shipment / Moving Company				
Transit Insurance				
Temporary Storage (up to 30 days)				
Pet Shipment Costs				
Subtotal - Moving & Storage				

3. DESTINATION & SETTLING-IN EXPENSES

EXPENSE CATEGORY / DESCRIPTION	DATE	PAYMENT METHOD	RECEIPT AMT (ORIGINAL)	AMOUNT (USD)
Temporary Housing (Destination)				
Rental Car / Local Transport (Temporary)				
Home Search / Lease Agent Fees				
Utility Hook-up & Connection Fees				

EXPENSE CATEGORY / DESCRIPTION	DATE	PAYMENT METHOD	RECEIPT AMT (ORIGINAL)	AMOUNT (USD)
Subtotal - Destination & Settling-In				

EXPENSE SUMMARY

CATEGORY	SUBTOTAL	ADVANCES RECEIVED	NET REIMBURSEMENT / (OWED)
1. Pre-Departure & Travel Expenses			
2. Moving & Storage Expenses			
3. Destination & Settling-In Expenses			
Total Relocation Expenses			

Instructions for Submission:

1. Attach all original receipts, invoices, and proof of payment for all line items listed.
2. Convert foreign currency expenses using the exchange rate active on the date of transaction.
3. Submit the completed and signed form to your Global Mobility Coordinator or HR Department within 30 days of your relocation arrival date.

Employee Signature: ______________________ **Date:** ______________________

Authorized Approval: ______________________ **Date:** ______________________