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| Moving Expense Reimbursement Agreement |
| Western Kentucky University |
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| Department: |   |  |  |  |  |
| Index Charged: |   |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
| Maximum Amount Authorized: |   |  |  |  |  |  |  |
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|  |  |  |  |  |
| Reimbursement of moving expenses is limited to the actual costs of allowable expenses |  |
| supported by original receipts, up to an overall maximum of $10,000. The appropriate Vice President may establish a lower reimbursement amount, either as a policy or on a case-by-case basis.  |  |  |  |
|  |  |  |  |  |  |  |  |  |
| Note: Please be sure department and new employee each have a copy of the Moving |  |
| Expense Reimbursement policy #3.1202. |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
| Employee Name: |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
| Address moved from: |   |  |  |  |  |
|  |   |  |  |  |  |
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| Justification for payment: |    |  |
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| Approved by:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |
|  Department Head (and Dean, if appropriate) |  |  | Date |  |  |  |
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| Approved by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |
|  Administrative Council Member |  | Date |  |  |  |
|  |  |  |  |  |  |  |  |  |
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| Accepted by employee:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |
|  Signature |  |  | Date |  |  |  |
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