1. TRAVEL AUTHORIZATION NO.	2. SOCI	AL SECURITY		elocation tr		TACHN	IEN.	VEL AUTHORIZATION/ADVANCE ENT FOR RELOCATION TRA AD-202R in lieu of Section C of Form AD-202 and .							
3. NAME (Last) (Fin							e Initial) 4. DISTANCE OF MOVE Less than 50 miles					50 miles or more			
SECTION C - ITINERAR		ESTIMA	TED EXP	ENDIT	URES										
5. TYPE APPOINTMENT (Indicate one type IP = Intergovernmental Pe	rsonnel N		intee SE = Seni				10. <i>A</i>	UTHORIZED					ESTIMATED A	AMOUNT	
Act Assignee (IPA) 6. NEW OFFICIAL STATION (City and Sta		T = All Other	App	ointment Up	on Separation	for Retirement		Per Diem: Rate		Miles	lo. Days		=\$ =\$		
								Other (Specify		viiles			-\$		
7. EXPENDITURES FOR H	HOUSEH	UNT AUTH	IORIZED												
8. AUTHORIZED TRAVELERS			9. ESTI FROM	MATED DA	TES OF TRA	NVEL IRU									
Employee and	d Mont					Common Carrier Tickets Transportation Mode Method of Purchase									
Employee Spouse PRIVACY ACT NOTICE The following the state of the sta	provided to comply with the Privacy Act of 1974										\$				
PRIVACY ACT NOTICE. The fol (P.L. 93-579). The information reque amended), Executive Orders 11609 of July 2	sted on this 22, 1971, and	form is requi 11012 of March	ired under the p 1 27, 1962, for the	purpose of f	of 5 U.S.C. (acilitating auth	Chapter 57 (as		Use of Non-co	ontract Airline	Ins	ert Code				
for travel and other expenses t contained in this form will be used by t	ministrative authorization. The information and employees who have a need for such information red to appropriate Federal, State, local, or foreign				Car Rental						\$				
agencies when relevant to civil, criminal or result in delay or suspension of the processi	regulatory in	vestigations, or p	prosecutions. Fail	ure to provid	e the informati	ion required will	11. T	OTAL ESTIMATED	EXPENDITURE	S FOR HO	USEHUNT		\$		
12. SEPARATE RELOCAT	S ELECTIO	N (Must a	ttach Form .	AD-202RE)	17. TRAVEL AND TRANSPORTATION OF FAMILY					ESTIMATED A	AMOUNT				
13. EXPENDITURES FOR					Per Diem: Rate \$ X No. Days					\$					
FROM				то			1	NTAL U.S. SU		1		1	1		
CITY	ST		CITY		ST	SUB. CODE	\$	DDGING +	M and IE	=	RATE	NO.DAYS	= \$		
							Φ	+					= \$ =	-	
							+	+		-				+	
								+		=		х =	=		
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							1	+		=			=		
44 MEMBERS OF IMMERIATE FA	NAUL 3/ 34/11/	0.14/11.1. DE 1	40VED	45 1101	A CC SDOU	CE IND		+		=		х =	<u> </u>		
14. MEMBERS OF IMMEDIATE FA	WILY WH	O WILL BE I	BIRTHE		MARIT	AL STATUS			Τ.	. T A I	CLIDCI	CTENCE			
SPOUSE			Billion	,,,,,,	III/AAAA	AL OTATOO			TRAVEL B	L BY POV			\$	_	
0.0002							N	D. OF POVS	RATE		TOTAL	MILES	+		
													1		
							—						\$		
							\perp	Other (Specify	y)						
							-								
							-								
					Unaccompanied Baggage					\$					
						Common Carrier Tickets									
							Transportation Mode Method of Purchase						\$		
16. ESTIMATED DATES OF TRAVEL FROM THRU							Use of Non-contract Airlin			Ins	ert Code				
Month Day Year Month Day Year							Excess Fare								
						Excess Baggage									
18. SHIPMENT OF HOUS				Commuted Rate								4			
ESTIMATED WEIGHT OF GOODS	PAYMENT N	METHOD Expense	Comm			RATE ADDIT			FIONAL ALLOWANCES						
19. STORAGE OF HOUSE	HOLD G		Ехрепзе	Comm	idled Itale	\$			\$				\$	_	
13. OTOKAGE OF HOUGE	ESTIMATED WEIGHT OF GOODS				COMMUTED RATE					+					
			TO BE STOR	ED	1ST DAY	STORAGE RA	TE OTHER DAYS STORAGE RATE			WAREI	HOUSE/F	PICKUP	1		
TEMPORARY STORAGE (Y/N)					\$		\$	ONAGE NATE		\$	-101 1041	_	\$		
20. TRANSPORTATION OF MOBILE HOME			(In lieu of ship	In lieu of shipment and storage of household go									\$		
21. TRANSPORTATION A		EHICLE									\$	\bot			
22. TEMPORARY QUART	AYS DAILY RATE FOR FIRST				30 DAYS DAILY RATE FOR OVER 30 DAYS					YS					
23. MISCELLANEOUS EX	DENICE	S/ALL 014/A	NCE		\$			\$					\$	+	
24. REAL ESTATE EXPE				heck appli	icable expe	nses)							Ψ	_	
Sale of Residence			se of Resider		,	Lease T	ermina	ition							
AMOUNT \$		AMOUNT \$,	AMOUNT \$							\$		
25. HOME PURCHASE INFO	RMATIO	N			·										
RESIDENCE ADDRESS AT OLD DUTY	STATION (S	Street, City, Stat	te, and Zip Code)	NAMES	OF ALL THI	E OWNERS OF	THE P	ROPERTY %	OWNERSHI		MILY :	MARITAL STATUS OF EMPLOYEE			
											+				
TELEPHONE (Area Code and Number)															
ESTIMATED	%	AUTHORIZED	1	% US	ED AS INCO	ME ANY K	NOWN	TITLE	UREA-FORM	1ALDEH	IYDE INS	SULATION			
SALES PRICE \$				PROD	DUCING			TS Y=Yes N=No		Y=Yes N=No			\$		
26. RELOCATION SERVI															
RELOCATION COMPANY NAME	TY		S (<i>Check Service</i> (me Purchase				٦	ma Martini		٦		alta a			
27. RELOCATION SERVI	CES CAI				Home Findin Agency			me Marketing Relocation Co	mpany C		gage Fin		\$		
	2_0 JAI		Junicelle			stimated Ex							\$	+	
					29.	Total Estim	ated	Expenditur	es for Tra	nsfer	of Sta	tion	\$		
DISTRIBUTE TOTAL OF THE										S AU	THORI	ZED	\$		
Service Agreement. I agree to remain in the appointment, unless separated for reasons	s beyond my	control and a	cceptable to the	Governmen	ıt. In case I vi	iolate this agree	ment, ar	ny	IUKE						
moneys expended by the United States on ac If I receive Withholding Allowance (WTA Allowance (RIT), (2) file all required docum) payments	for claims filed	for travel expen	ses I agree t	to: (1) file for	a Relocation In	come Ta	ax				_			
unless an extension of time is granted by the	Governmen	t. If I am overpa													