



ONGOING MOP(S) ACT EMPLOYEES

CLAIM FOR REIMBURSEMENT OF RELOCATION EXPENSES

(Travel expenses, removal of personal and household goods, relocation of vehicle(s), relocation of pet(s) and temporary accommodation)

Form 49 Relocation of MOP(S) Act Staff must be submitted to Ministerial and Parliamentary Services.

Note: • This form is to be completed for all relocation expense claims.

- Tax invoices and receipts and/or other relevant supporting documentation are required for all claims including quotes.
- Claims should be lodged as soon as the relocation is complete.

Options for returning your completed form

Scan and Email to: mpshelp@finance.gov.au

Ministerial and Parliamentary Services

• All relevant fields must be completed to ensure timely payment of claims (incomplete forms may cause delay in payment).

Enquiries: Ministerial and Parliamentary

(02) 6215 3333

mpshelp@finance.gov.au

Services Email:

Phone:

EMPLOYER DETAILS	Employer name				
	Employer state				
EMPLOYEE DETAILS	Full name				
	▶ Email [
	Work phone number			Mobile numb	er
	New work base				
	Date of the change of	work base			
	New home address				
					Postcode
	Date of relocation				
	Number of accompany	ying dependants			
	Are you maintaining household in former v		No ☐ Yes ☐ ▶ Nu	umber of depen	dants left in former work base

TRAVEL EXPENSES

					Temporary accommodation			
Date	Travel from	Travel to	Type of travel (air, bus, train)	No. of travellers	Commercial or non-commercial	Date from	Date to	No. of nights

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Type of relocation (household, vehicle, pets)	Relocation from	Relocation to	Length of storage (weeks, days)

VEHICLE EXPENSES

Date	Travel from	Travel to	Engine capacity cc	Engine type (piston/rotary)	Kilometres driven	Vehicle make and model

SIGNATURE

Certification by Employee

- I certify that I have taken a direct route to my new location.
- I certify that the above information is correct.

By signing this form, I acknowledge that:

- I understand that knowingly giving false or misleading information is a serious offence under the *Criminal Code Act 1995*.
- I have read and understood the Privacy Collection Notice (see below).

Signature of Employee	Please print and sign this form	Date	
		/ /	

Certification and authorisation by Parliamentarian

- I certify that the above travel and accommodation was for relocation purposes as authorised by myself.
- I understand that knowingly giving false or misleading information is a serious offence under the Criminal Code Act 1995.

Signature of Employer	Please print and sign this form	Date / /

Privacy Collection Notice — Consistent with the *Privacy Act 1988*, the Department of Finance (Finance) uses and discloses personal information provided in this form to facilitate the administration of the parliamentary business resources framework and for employment purposes including to facilitate the management of incidents or complaints arising from employment. Personal and sensitive information may be disclosed to the employing Parliamentarian, the Independent Parliamentary Expenses Authority (IPEA), the Department of Parliamentary Services, the Parliamentary Workplace Support Service (PWSS), or as otherwise required by law. Details of the related expenditure may be tabled in Parliament, published on Finance's website, or provided to the Special Minister of State, IPEA, or publicly, as authorised by law. More information is available at https://maps.finance.gov.au/maps-privacy-statement.