

Shipment summary worksheet

Customer information

Name Last, first, middle initial

Preferred email	Preferred phone

DOD ID Rank/grade Service branch/agency

Mailing address for IRS form W-2

Orders & accounting information					
Order issue date		Order type/order number	Order type/order number		
Issuing branch/agency		New duty assignment	New duty assignment		
Entitlements & m	ove summary				
Move summary					
Authorized origin	Authorized destination	POV shipment authorized	Max SIT storage entitlement		

Maximum weight entitlement

Entitlement (lbs)	Pro-gear (lbs)	Spouse pro-gear (lbs)	lotal weight (lbs)

Shipment number/type

Shipment number/type	Pick-up date	Shipment weight (lbs)	Current shipment status	

Storage Shipment number/type

Max advance

Maximum obligations		 Actual obligations Based on above shipments and storage			age		

Delivery date

Advance

Maximum obligations	Actual obligations Based on above shipments and storage			
100% GCC (lbs)	100% GCC (lbs)			
SIT	SIT			

GENERATED FROM MILMOVE | DEFENSE PERSONAL PROPERTY PROGRAM

Entry date

Total days in storage



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Current payment red	quest				
Member-paid expenses	nber-paid expenses Claimable expenses Member-pa		Member-paid	GTCC-paid	
		Contracted exp	enses		
GTCC-paid expenses		Consumable packing materials			
		Weighing fees			
Remaining PPM incentive (p	ore-tax)	Gas			
		_ Tolls			
Member-paid SIT		Oil			
		Other			
GTCC-paid SIT		Total		\$0.00	\$0.00
*Any money paid to member above the to tax.	amount of claimable ex	penses listed above will b	e subject to tax at standa	ard rate (estimated 22	%). SIT reimbursements are not subject
Disbursement	Pick-up date		Shipment weight	(lbs) C	urrent shipment status
Trusted agents Allowe	ed to act on custom	ers behalf via letter o	f authorization		
					Dhana
Name Last, first, middle initial	Authori	zation date (YYYYM	imbb) Email		Phone
Legal agreements / ¡	privacy act —	- customer			
from my pay as necessary to co Advance obligations I understand that the maximum event less weight is moved or m of my incentive disbursement a	ver all excess costs n advance allowed ny move occurs on nd/or from the coll PM shipment, I agre	is based on the esting a different schedule lection of my pay as ee to furnish weight	hipment(s). nated weight and sc d departure date, I r may be necessary. tickets within 45 day	theduled departu may have to remit ys of final delivery	nent, or consent to the collection re date of my shipment(s). In the the difference with the balance y to my destination. I understand y to cover the cost of the
Enclosed documenta	ition				
Orders (with all amendn	nents)	Weight tick	et (other)		Other
Origin weight ticket (em	ipty)	Receipts fo	r reimbursable exp	penses	
Origin weight ticket (ful	l)	Vehicle regi	stration		
Destination weight ticke	et (full)	DD-FMS-22	31 direct deposit	form	
Signatures					
Signature of customer or tro	usted agent	PPPO/PPSO re	eperesentative		Date signed