

## **Shipment summary worksheet**

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Customor information		

Name Last, first, middle initial					
Preferred email		Preferred phone	Preferred phone		
DOD ID	Rank/grade	Servi	Service branch/agency		
Mailing address for IRS for	m W-2				
Orders & accounting	g information				
Order issue date		Order type/order number	Order type/order number		
Issuing branch/agency		New duty assignment	New duty assignment		
Entitlements & move	e summary				
Reimbursement Type					
Actual Expense Reimburse	ement Small Package Reimbu	rsement			
Move summary					
Authorized origin	Authorized destination	POV shipment authorized	Max SIT storage entitlement		
Maximum weight entitleme	ent	I			
Entitlement (lbs)	Pro-gear (lbs)	Spouse pro-gear (lbs)	Total weight (lbs)		
Shipments		l			
Shipment number/type	Pick-up date	Shipment weight (lbs)	Current shipment status		
Storage					
Shipment number/type	Entry date	Delivery date	Total days in storage		
Maximum obligations		Actual obligations Based on above shipments and storage			
100% GCC (lbs)		100% GCC (lbs)			
SIT		SIT			
Max advance		Advance			
GENERATED FROM MILMOVE	DEFENSE PERSONAL PROPERTY P	ROGRAM v6 –	2022-Jul-01 Page 1 of 3		



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Current payment re	equest					
Member-paid expenses		Claimed Expense	es Membe	er-paid	GTCC-paid	
		Contracted expen	ses			
GTCC-paid expenses Consumable packing materials						
		Weighing fees				
Remaining PPM incentive (pre-tax)		Rental equipmen	t			
		Small package rei	mbursement			
		Tolls				
Member-paid SIT		Oil				
		Other	Other			
GTCC-paid SIT		Total				
*Any money paid to member above the to tax.	ne amount of claimable e	xpenses listed above will be	subject to tax at standard rate (es	stimated 22%). SIT	reimbursements are not subject	
Disbursement	Pick-up date	9	Shipment weight (lbs)	Currer	nt shipment status	
Trusted agents All	lowed to act on custor	mers behalf via letter of a	authorization			
Name Last, first, middle initia	Author	rization date (YYYYM)	MDD) <b>Email</b>		Phone	
			1			
Legal agreements	/ privacy act –	– customer				
Financial liability If this shipment(s) incurs cost from my pay as necessary to a Advance obligations I understand that the maximule event less weight is moved or of my incentive disbursement of I receive an advance for my that failure to furnish weight advance.	cover all excess cost um advance allowed my move occurs or t and/or from the co PPM shipment, I ag	is associated by this shad is based on the estiment a different scheduled ollection of my pay as ree to furnish weight t	ipment(s). ated weight and scheduled I departure date, I may have nay be necessary. ickets within 45 days of fina	I departure dat e to remit the d	e of my shipment(s). In the lifference with the balance y destination. I understanc	
Enclosed documen	tation					
Orders (with all amen	dments)	Weight ticke	t (other)		Other	
Origin weight ticket (e	empty)	=	reimbursable expenses	_	_	
Origin weight ticket (f		Vehicle regis				
		=				
Destination weight tic	ket (Tull)	☐ DD-FM2-223	31 direct deposit form			
Signatures				· ·		
Signature of customer or	trusted agent	PPPO/PPSO re	peresentative	Date	esigned	



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## Additional Shipments

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