Moving Expense Reimbursement Policy

Date: [Insert Date]

To: [Employee Name]

Subject: Moving Expense Reimbursement Policy

Dear [Employee Name],

We are pleased to inform you about our Moving Expense Reimbursement Policy, which outlines the expenses eligible for reimbursement when you relocate for your position within the company.

Eligibility:

This policy applies to all full-time employees who have received official notice of a transfer or relocation.

Covered Expenses:

- Moving company fees
- · Packing supplies
- Transportation costs
- Temporary housing expenses
- Storage fees

Reimbursement Process:

To receive reimbursement, please submit the following:

- 1. All original receipts
- 2. A completed reimbursement form
- 3. A brief explanation of each expense

All submissions must be made within [X days] of incurring the expense. Late submissions will not be considered.

Contact Information:

If you have any questions or require further clarification regarding this policy, please contact the HR department.

Thank you, and we wish you the best of luck with your move!

Sincerely,

[Your Name] [Your Job Title] [Company Name]