

## LIVING QUARTERS ALLOWANCE COMPUTATION WORKSHEET **ANNUAL REVIEW**

PART I										
This form is provided to all U. S. Civilian Employees receiving Living Quarters Allowance for use in recording all housing costs. In DOD Standardized Regulations, it is suggested this form be completed as follows:										
<ol> <li>Fill out on a monthly basis</li> <li>Must be submitted on any of the following occasions: (a) Initial Reconciliation; (b) 12-month anniversary following a change of quarters; or (c) At request of employee or management</li> </ol>										
PART II - To be completed by employee:										
Name:				G	rade:	Activ	ity:			
SSN:				N	No. of Dependents at Post:					
Move	Move-in Date: Move-out D			e-out Date:	te: (as applicable)					
Phone	e:		Fax:			Email:				
Monthly Expenditures for Allowable Expenses (Express in currency of the country i.e., Euro, Yen or GBP)										
Month/Yr		Rent	Electric	Heat (gasolio)	Water (Not bottled)	Garbage	Nebenkosten	Other*		

Falsification or misrepresentation of an item in a claim may result in forfeiture of the entire claim as provided in 28 U.S.C. 2514, as well as removal from employment in the federal service.

EMPLOYEE STATEMENT I certify that the information given on the application is true and correct to the best of my knowledge and belief.

Signature	Date	

<sup>\*</sup> Other Expenses should be numbered and explained below or on a separate sheet of paper.