MOVE-IN HOUSING ALLOWANCE CLAIM				INTERAGENCY REPORT CONTROL NUMBER 0370-DOD-AR	
FOR PERSONNEL OCCUPYING PRIVATELY LEASED/OWNED QUARTERS OVER				REPORT CONTROL SYMBOL	
(Read Warning, Privacy Act Statement, and Instructions on reverse before completion) DD-P&R(AR)1834					
PART A - SERVICEMEMBER IDENTIFICATION AND RESIDENCE INFORMATION   1. NAME (Last, First, Middle Initial) 2. GRADE 3. SOCIAL SECURITY NUMBER					
			Z. OKADE		5. SOCIAL SECONT I NOMBER
4. DUTY LOCATION OR HOMEPORT b. LOCATION CODE			5. RESIDEN	ICE ADDRESS	(Street, Apt. No., City, Country)
a. STATION NAME (0		(Official Use)			
c. CITY	d. COUNTRY	e. DUTY TELEPHONE NO.			
F	ARTS B - C - FYDENSES A	SSOCIATED WITH OCCUPY			PTEPS
a. b. c.					
EXPENSE ITEMS (List all expense items in Parts B and C below. Enter "None" if appropriate. If a sharer, only one sharer may report an expense item. Report all amounts in dollars and cents. Refer to Instructions and Appendix N, JFTR, to determine what can and cannot be reported.)			AMOUNT CLAIMED (If payment made in foreign currency, convert to dollars at actual conversion rate.)AMOUNT ALLOWED (If certifier excludes any amount, provide explanation on separate sheet.) (Official Use)		
	PART B - RENT-F	RELATED EXPENSES (Not app	plicable to hor	meowners)	
6. PART B SUBTOTAL (Official Use)					
PART C - SECURITY-RELATED EXPENSES (Allowed only in selected areas. See Appendix N.)					
7. PART C SUBTOTAL (Official Use)					
PA	RT D - REIMBURSEMENT	TO MEMBER (Official use on	y. Serviceme	ember - skip to	o Part E.)
8. AMOUNT FROM LINE (	5				
9. AMOUNT FROM LINE 7					
10. AMOUNT DUE MEMBER (Sum of Lines 8 and 9)					
		PART E - CERTIFICATIO			
11. SERVICEMEMBER. I certify that the information reported in Parts A - C is true and correct. a. SIGNATURE					b. DATE SIGNED (YYYYMMDD)
properly reported. I ha	ve entered monthly rent (i		ion rate, if ap		and certify that information was I total sharers from member's
a. RENT	b. TOTAL SHARERS	c. TITLE			
d. SIGNATURE		1			e. DATE SIGNED (YYYYMMDD)

**WARNING:** Making a false statement or claim against the U.S. Government is punishable by courts-martial. The penalty for willfully making a false claim or a false statement in connection with claims is a maximum fine of \$10,000 or imprisonment for five years, or both.

## PRIVACY ACT STATEMENT

AUTHORITY: Title 5, 37 U.S. Code, Section 405, and EO 9397, November 1943 (SSN).

**PRINCIPAL PURPOSE(S):** To determine eligibility for and authorize payment of selected one-time costs associated with occupying privately leased/owned housing.

**ROUTINE USE(S):** In addition to being used by officials and in determining payment eligibility, the information provided herein may be provided to law enforcement personnel investigating those suspected of fraudulently obtaining payments, and to other Federal agencies, members of Congress, State and Local government, and U.S. and State courts.

**DISCLOSURE:** Voluntary; however, failure to provide the SSN may preclude timely consideration of your request for payment determination.

## INSTRUCTIONS

Entitlement claims for the Move-In Housing Allowance (MIHA) are covered by two forms. This form covers qualifying rent- and security-related expenses (Parts B and C) and should be completed only if the member incurs such expenses. Miscellaneous expenses are covered by the DD Form 2367, "Individual Overseas Housing Allowance (OHA) Report" (Part C). To qualify for MIHA, a member must be eligible for the Overseas Housing Allowance (OHA). Additional rules and detailed instructions for completing this form and DD Form 2367, Part C, are contained in Appendix N, Joint Federal Travel Regulations (JFTR), Volume I. To qualify for full or partial reimbursement for Part B or C expenses, receipts/documents showing actual costs must be provided. If expense reported in Part B or C is incurred in foreign currency, convert to dollars using the rate member actually converted dollars to foreign currency. If the member is a "sharer" under the OHA program, only one sharer can claim an individual Part B or C expense. Members may submit more than one form while assigned to a duty location (e.g., to claim rent-related expenses (Part B), then again to claim security expenses (Part C)).

The Move-In Housing Allowance (MIHA) covers only reasonable costs. Accordingly, the Services place a significant responsibility on the approving official to exclude extraordinary, unjustifiable expenses. There are three MIHA categories:

**MIHA/Rent** (covered by Part B). These are typically one-time, non-refundable charges levied by the landlord/agent or a foreign government which the member must pay before or upon occupying the unit. Examples are real estate agent's fees, redecoration fees, and one-time lease taxes. Refundable security deposits and advance rental payments <u>cannot</u> be reported. Recurring costs are also excluded.

**MIHA/Security** (covered by Part C). This part may be completed only by members assigned to areas where dwellings must be modified to minimize exposure to terrorist threat. Qualifying areas are listed in Appendix N of the JFTR. Examples of permissible items are security doors, bars, locks, lights, and alarm systems. Expenditures which are not related to the physical dwelling, such as for personal security guards or dogs, are not permitted.

**MIHA/Miscellaneous** (covered by Part C, DD Form 2367). This category reflects average expenditures made by members to make their dwellings habitable. This lump-sum payment (receipts not required) recognizes that items such as sinks, toilets, light fixtures, kitchen cabinets, door/window locks, and a refrigerator and stove are sometimes not provided in overseas dwellings. The amount payable is prescribed in Appendix K of the JFTR. Only one payment is authorized at a duty station unless special provisions contained in Appendix N apply.