

CLAIM FOR TEMPORARY LODGING ALLOWANCES

(USFK REG 37-57)

PRIVACY ACT STATEMENT

- AUTHORITY:** Title 37 US Code 405, Pay and Allowance of Uniformed Services, Per Diem Outside of the CONUS, Alaska and Hawaii.
- PRINCIPAL PURPOSE:** To provide a method for claiming payment of temporary lodging allowance incident to occupancy of temporary lodging and procurement of meals in public restaurants while on duty overseas. This form is used to itemize daily expenses incurred and as a supporting document for the payment of the allowance.
- ROUTINE USES:** This form is sent through command channels to the respective service finance center in Indianapolis, Cleveland, Denver, or Kansas City. This form is filed by voucher number and is subject to General Accounting Office audit for verification of proper disbursement of public funds.
- DISCLOSURE:** The personal information (including social security number) is requested for identification purposes only. The disclosure of this information is voluntary; however, failure to provide any of the requested data may preclude payment of the temporary lodging allowance.

ATTACHED THIS FORM TO THE REIMBURSEMENT VOUCHER OR OTHER PAY AUTHORIZATION

PART IA - IDENTIFICATION OF SPONSOR

NAME (<i>Last, First, Middle</i>)	GRADE	SSN	DUTY PHONE NUMBER
UNIT ADDRESS	UNIT LOCATION	NUMBER OF FAMILY MEMBER(S)	
DATE SPONSOR REPORTED/DEPARTED	DATE FAMILY MEMBER(S) ARRIVAL/DEPARTURE		

PART IB - STATEMENT OF CLAIMANT (*ARRIVAL AT/DEPARTURE FROM PERMANENT DUTY STATION*)

I have occupied temporary lodging at _____ with family member(s) from _____ to _____, both dates inclusive. Expenses shown hereon are true and correct to the best of my knowledge and represent necessary use of temporary lodging. I am on a JOINT DOMICILE/COMMAND SPONSORED/ALL OTHERS TOUR (Circle One). I was in a TDY/Leave/Hospital (Circle One) status from _____ to _____ both dates inclusive (if applicable).

CLAIMANT'S SIGNATURE AND DATE

PART II - STATEMENT OF UNIT COMMANDER (*FOR E-6 AND BELOW*)

Government quarters were not available due to the lack of space or renovation for the period from _____ to _____.

COMMANDER'S SIGNATURE AND DATE

PART III - STATEMENT BY HOUSING OFFICER

- ARRIVAL:** Government quarters were not available for the claimant upon initial arrival. Claimant is to be assigned to Government quarters or to occupy economy quarters effective _____.
- DEPARTURE:** Government quarters were not available to the claimant after it was necessary to surrender permanent living quarters; Government quarters were terminated _____; permanent housing was vacated _____ or household goods were surrendered to a transportation officer for shipment _____.
- The above statement for ARRIVAL/DEPARTURE is issued in lieu of DD Form 1351-5. Temporary lodging allowance (TLA) payment is authorized from _____ to _____, both dates inclusive.

HOUSING OFFICER'S SIGNATURE AND DATE

PART IV - STATEMENT BY HOUSING OFFICER

TEMPORARY LODGING ALLOWANCES (TLA) WILL BE PAID BY ELECTRONIC FUNDS TRANSFER (EFT) TO THE CUSTOMERS BANK ACCOUNT WITHIN 72 HOURS OF RECEIPT BY FINANCE OFFICE. FOR MILITARY CUSTOMERS THE OTHER CHOICE IS TO RECEIVE THE TLA PAYMENT ON THEIR LEAVE AND EARNING STATEMENT (LES). THE PAYMENT MAY BE RECEIVED ON MID-MONTH OR EOM LES.