



### What is SmartVoucher?

SmartVoucher is a web-based tool that guides you, the traveler, through a series of user-friendly questions about yourself and your travel (and your dependents (as applicable)). Your responses to these questions help to populate your DD1351-2 and other necessary forms. The tool prompts travelers to upload supporting documents that will be securely and electronically submitted with your travel voucher.

### Where is SmartVoucher located?

SmartVoucher is available under the myPay Quick Links, "SmartVoucher – Complete a DD 1351-2" or directly at <https://smartvoucher.dfas.mil/voucher/>.



### How do I access SmartVoucher?

Login with CAC OR myPay Username and Password/PIN.

### Welcome to Travel Pay Service's SmartVoucher!

This website has been tested on IE8, Firefox and Chrome

#### Login with myPay Username and Password

**Fields are case-sensitive:**

**Login ID**   
(Same as myPay, NOT your Social Security Number)

**Password**   
(Same as myPay, NOT Interactive Voice Response System (IVRS) Personal Identification Number (PIN))

Forgot your Login ID or Password, click [HERE!](#)

To enter your Password more securely, click on the On-Screen Keyboard button below.

#### Login with DoD CAC



United States Government  
JAN2009  
John G. Doe  
DoD  
2009 JAN 18  
Geneva Conventions Identification Card

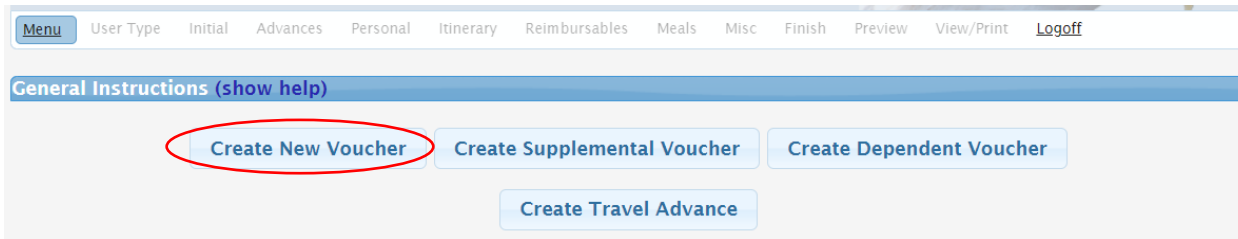
You may also log in with YOUR own personal Common Access Card (CAC). You cannot use someone else's CAC.

Please select your NON-Email certificate.

If you do not have your myPay username and password/PIN, click the Forgot your Login ID or Password link or contact our Customer Care Center at 1-888-DFAS411 or 1-888-332-7411, option 5, then option 2, Monday – Friday between the hours of 0800-1700 Eastern Time.

## How do I begin?

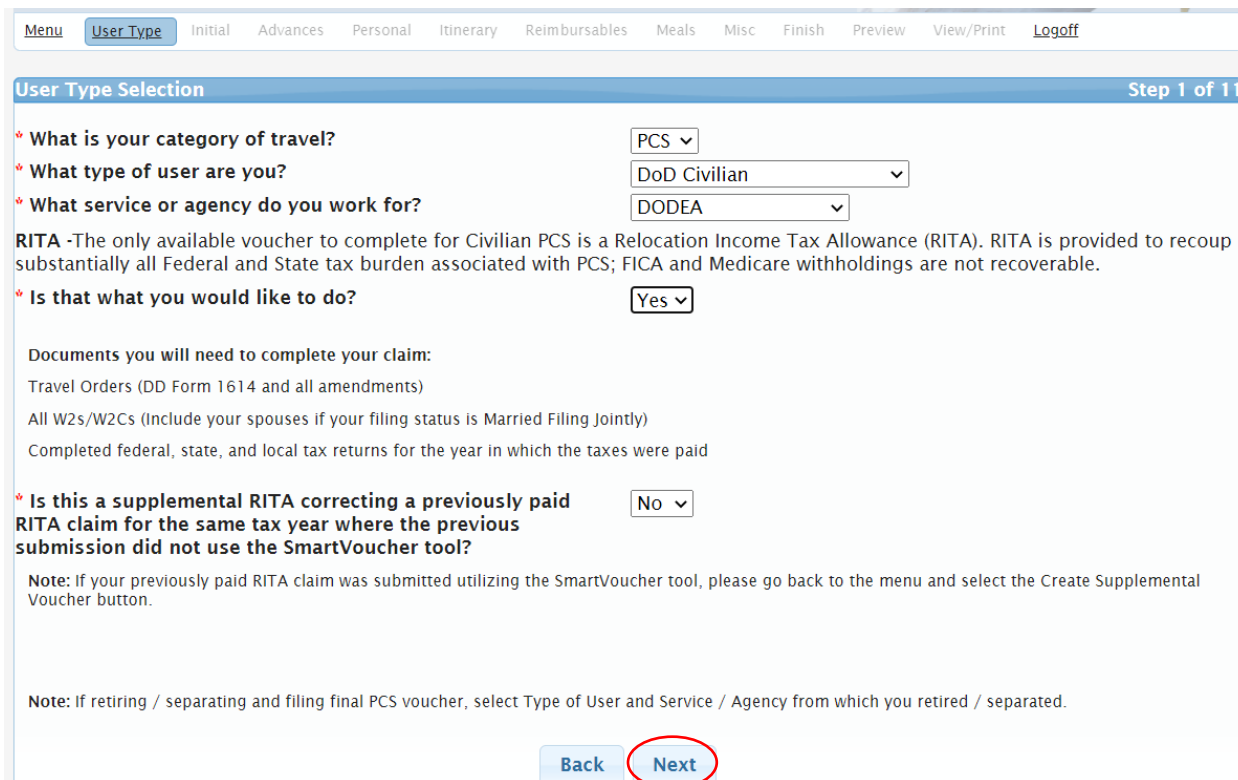
On the Menu tab, select the “Create New Voucher” button.



The screenshot shows the top navigation bar with tabs: Menu, User Type, Initial, Advances, Personal, Itinerary, Reimbursables, Meals, Misc, Finish, Preview, View/Print, and Logoff. Below the navigation bar is a blue header for 'General Instructions (show help)'. Underneath, there are four buttons: 'Create New Voucher' (circled in red), 'Create Supplemental Voucher', 'Create Dependent Voucher', and 'Create Travel Advance'.

On the User Type tab (Step 1 of 9), please identify your type of travel, in this case PCS, and what type of traveler you are, i.e. DoD Civilian. Next, from the drop down select which service or agency you work for, this helps to ensure your travel claim packet flows to the correct team for review and approval.

**NOTE:** At this time, the only available voucher to complete for Civilian PCS is a Relocation Income Tax Allowance (RITA). If this is what you would like to do, a list of documents that you will need to complete your claim is provided.



The screenshot shows the 'User Type Selection' screen (Step 1 of 11). It contains the following fields and text:

- \* What is your category of travel? PCS ▾
- \* What type of user are you? DoD Civilian ▾
- \* What service or agency do you work for? DODEA ▾
- RITA** -The only available voucher to complete for Civilian PCS is a Relocation Income Tax Allowance (RITA). RITA is provided to recoup substantially all Federal and State tax burden associated with PCS; FICA and Medicare withholdings are not recoverable.
- \* Is that what you would like to do? Yes ▾
- Documents you will need to complete your claim:
  - Travel Orders (DD Form 1614 and all amendments)
  - All W2s/W2Cs (Include your spouses if your filing status is Married Filing Jointly)
  - Completed federal, state, and local tax returns for the year in which the taxes were paid
- \* Is this a supplemental RITA correcting a previously paid RITA claim for the same tax year where the previous submission did not use the SmartVoucher tool? No ▾
- Note: If your previously paid RITA claim was submitted utilizing the SmartVoucher tool, please go back to the menu and select the Create Supplemental Voucher button.
- Note: If retiring / separating and filing final PCS voucher, select Type of User and Service / Agency from which you retired / separated.

At the bottom, there are 'Back' and 'Next' buttons, with the 'Next' button circled in red.

Select the Next button to move to the next tab.

## FOR SUPPLEMENTAL CLAIMS ONLY!

If your previously paid RITA claim for the same tax period was submitted NOT using SmartVoucher please select Yes in the drop down for the last question on the screen shown above.

If your previously paid RITA claim for the same tax period was submitted using SmartVoucher you must go back to the Menu and select the “Create Supplemental Voucher” button.

On the Initial tab (Step 2 of 9), please provide information from your PCS travel orders. Show/Hide Help is available and will provide visual aids on the requested information.

Travel Order Number is block 25 from your DD Form 1614.

Travel Order Issue Date is block 26 from your DD Form 1614.

New Duty Station information is block 8 from your DD Form 1614.

**Initial Information** Step 2 of 9

Menu User Type **Initial** Personal Federal Tax State Tax Certified Statement Misc View/Print Logoff

\* **Travel Order Number** [Show/Hide Help](#)

Note: Enter your original PCS order number in the box.

\* **What is the issue date on the orders?**  MM/DD/YYYY

What is your travel order number? For PCS, the order number should be located in block 25.

Example:

|                                                          |                                               |
|----------------------------------------------------------|-----------------------------------------------|
| <b>25. TRAVEL AUTHORIZATION NUMBER</b><br>DOE6789PK90001 | <b>26. DATE ISSUED (YYYYMMDD)</b><br>20180919 |
|----------------------------------------------------------|-----------------------------------------------|

DD FORM 1614, MAY 2003 PREVIOUS EDITION IS OBSOLETE. Adobe Professional 8.0

\* **New Duty Station Country:**

\* **New Duty Station Street:** [Show/Hide Help](#)

\* **New Duty Station Zip Code/APO/FPO:** [Zip Code Lookup](#)

\* **Installation/Base/City:**

\* **New Duty Station State:**

\* **You will be paid by direct deposit** [Show/Hide Help](#)

Note: PCS moves must be Direct Deposit.

DOD Regulation  
DoDFMR Vol 9 Chp 8-080102. Payment Method. Electronic funds transfer (EFT) is the mandatory means by which a travel claim is settled within the Department. Supervisors may authorize alternate methods of payment in limited situations where the traveler does not have access to an account at a financial institution that can receive EFT transmissions. Split disbursement, which permits direct payment via EFT to the travel card contractor for charges incurred on the travel card and to the cardholder for any residual amount, shall be made available to travelers as a payment option. This payment option enables travelers to elect a split disbursement by stating on the voucher in block 1 (payment required by) the amount of money to be forwarded to the card contractor.

\* **Has your banking information changed since your last travel claim was paid?**

If you would like to confirm/change banking information, do so by clicking on the below link and then selecting SF 1199A  
[SF 1199A](#)

Note: Please attach a completed SF1 199A form with the travel voucher.

[Back](#) [Next](#)

If your banking information has changed since your last travel claim was paid you will need to select Yes from the drop down and upload a completed SF 1199A with your travel voucher, a link to the form is provided. This will allow DFAS to process your payment to the correct bank account.

Select the Next button to move to the next tab.

On the Personal tab (Step 3 of 9), please provide information about yourself. Your SSN is populated and masked because you accessed with your CAC or myPay userid and password/PIN.

The rest of the information once input will be archived in the system for future use. You are able to edit all fields, except SSN, as needed.

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**Personal Information** Step 3 of 9

**Instructions:** Please provide your current address and phone number so we may contact you if necessary.

✧ **First Name:**

**Middle Initial:**

✧ **Last Name:**

**Social Security Number:** \*\*\*-\*\*-3305

✧ **Grade/Rank:**

✧ **Current Country:**

✧ **Current Street:**

**Current Street2:**

✧ **Current Zip Code/APO/FPO:** [Zip Code Lookup](#)

✧ **Current City:**

✧ **Current State:**

✧ **Phone Number:(Daytime)**   
Note: Please provide the best phone number where we may contact you.

✧ **Email Address:**   
Note: Provide the email address you read most consistently.

Opt in to receive updates on the status of your claim via text message in myPay!



Please ensure your email address is accurate and checked on a regular basis because you will receive notification from SmartVoucher if your voucher needs to be returned for correction.

If you wish to receive text notifications on the status of your claim (and future claims) as they make their way through the computation and payment process, please click on the myPay link (<https://mypay.dfas.mil/#/>) to add your cell phone number to your myPay profile and “Opt In” to receive text notifications.

Select the Next button to move to the next tab.

On the Federal Tax tab (Step 4 of 9), please provide information from your Federal Income Taxes. **Show/Hide Help is available and will provide visual aids on the requested information.**

Tax Year represents the tax year in which you received your travel pay reimbursements.

NOTE: Prior to 2018, moving expenses (for those other than Member of the Armed Forces) could be deducted from U.S. Individual Income Tax Returns on Form 3903 and included on line 26 of the 1040 Form. Please review your documents, if you filed a Form 3903 please upload it with your Federal Income Taxes with itemization of expenses claimed and check the box beside Moving Expenses Claimed?

Filing Status represents what you selected on your 1040 Form.

Menu User Type Initial Personal **Federal Tax** State Tax Certified Statement Misc View/Print Logoff

**Federal Income Tax** Step 4 of 9

Note: In order to avoid processing delays, the following data is being compared to what was reported on your income taxes. Failure to do so will result in your claim being returned without action until you provide a corrected claim and/or additional documentation to support the claim.

\* Tax Year: 2020

Note: Prior to 2018, moving expenses (for those other than Members of the Armed Forces) could be deducted from U.S. Individual Income Tax Returns on Form 3903 and included on line 26 of the 1040 Form. Please review your documents, if you filed a Form 3903 please upload it with your Federal Income Taxes with itemization of expenses claimed and check the box below.

Moving Expenses Claimed? ☐ Show/Hide Help

\* What was your filing status on your U.S. Individual Income Tax Return? ☐ Show/Hide Help Single

**Form 1040** Department of the Treasury—Internal Revenue Service (99) **2019** OMB No. 1545-0074 IRS Use Only—Do not write or staple in this space.

**Filing Status** ☐ Single ☐ Married filing jointly ☐ Married filing separately (MFS) ☐ Head of household (HOH) ☐ Qualifying widow(er) (QW)  
Check only one box.  
If you checked the MFS box, enter the name of spouse. If you checked the HOH or QW box, enter the child's name if the qualifying person is a child but not your dependent. ▶

Federal Taxable Income is from your 1040 Form, block 11b or 1040X Form, block 5C, in the event you filed an amended tax return.

\* What Is the total Federal Taxable Income from U.S. Individual Income Tax Return 1040, Block 11b or Amended U.S. Individual Income Tax Return 1040X, Block 5 C?  Show/Hide Help

b Taxable income. Subtract line 11a from line 8b. If zero or less, enter -0- 11b Form 1040 60196

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions. Cat. No. 11320B

**Form 1040-X** Department of the Treasury—Internal Revenue Service  
(Rev. January 2020) **Amended U.S. Individual Income Tax Return** OMB No. 1545-0074  
Go to [www.irs.gov/Form1040X](http://www.irs.gov/Form1040X) for instructions and the latest information.

This return is for calendar year ☐ 2019 ☐ 2018 ☐ 2017 ☐ 2016  
Other year. Enter one: calendar year or fiscal year (month and year ended):

Your first name and middle initial Last name Your social security number  
If joint return, spouse's first name and middle initial Last name Spouse's social security number  
Current home address (number and street). If you have a P.O. box, see instructions. Apt. no. Your phone number  
City, town or post office, state, and ZIP code. If you have a foreign address, also complete spaces below. See instructions.  
Foreign country name Foreign province/state/county Foreign postal code

Amended return filing status. You must check one box even if you are not changing your filing status. Caution: In general, you can't change your filing status from a joint return to separate returns after the due date. ☐ Full-year health care coverage (or, for amended 2018 returns only, exempt). If amending a 2019 return, leave blank. See instructions.

☐ Single ☐ Married filing jointly ☐ Married filing separately (MFS) ☐ Qualifying widow(er) (QW) ☐ Head of household (HOH)  
If you checked the MFS box, enter the name of spouse. If you checked the HOH or QW box, enter the child's name if the qualifying person is a child but not your dependent. ▶

Use Part III on the back to explain any changes

| Income and Deductions                                                                                                           | A. Original amount reported or as previously adjusted (see instructions) | B. Net change—amount of increase or (decrease)—explain in Part III | C. Correct amount |
|---------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------|--------------------------------------------------------------------|-------------------|
| 1 Adjusted gross income. If a net operating loss (NOL) carryback is included, check here                                        | 1                                                                        |                                                                    |                   |
| 2 Itemized deductions or standard deduction                                                                                     | 2                                                                        |                                                                    |                   |
| 3 Subtract line 2 from line 1                                                                                                   | 3                                                                        |                                                                    |                   |
| 4a Exemptions (amended 2017 or earlier returns only). If changing, complete Part I on page 2 and enter the amount from line 29. | 4a                                                                       |                                                                    |                   |
| 4b Qualified business income deduction (amended 2018 or later returns only)                                                     | 4b                                                                       |                                                                    |                   |
| 5 Taxable income. Subtract line 4a or 4b from line 3. If the result is zero or less, enter -0-                                  | 5                                                                        |                                                                    |                   |

Federal Wages, salaries, tips, etc. is from your 1040 Form, block 1 or the total amount used to calculate your Adjusted Gross Income on 1040X From, block 1C, in the event you filed an amended tax return. This is your total wages, salaries, tips, etc. before deductions.

\* What are the Wages, salaries, tips, etc. from U.S. Individual Income Tax Return 1040, Block 1 or total amount used to calculate Adjusted Gross Income on an Amended U.S. Individual Income Tax Return 1040X, Block 1 C?

Show/Hide Help

1 Wages, salaries, tips, etc. Attach Form(s) W-2

Did you receive travel reimbursements that were not deductible for State income tax purposes? ☐

The image shows a screenshot of a tax form. A red arrow points from a 'Show/Hide Help' button to a tab labeled '1 Wages, salaries, tips, etc. Attach Form(s) W-2'. Another red circle highlights the number '1' in the tab's header area.

Please check the box if you received travel reimbursements that were not deductible for State Income tax purposes.

Next, please upload the supporting documents that represent the parts of your total wages, salaries, tips, etc. before deductions. Select the document type, input the Wages, Tips and Other Compensation from that document and select the corresponding file to upload. NOTE: Allowed file types are as follows: bmp, gif, jpeg, pdf, pjpeg, png and the file size limit is 2MB.

Upload Supporting Documents - Gross Income

DO NOT UPLOAD DOCUMENTS THAT CONTAIN A DIGITAL SIGNATURE

Allowed file types: bmp,gif,jpeg,pdf,pjpeg,png  
File size Limit: 2 mb

\* Document Type: Payroll W2 (self) ▼

\* Wages, Tips and Other Compensation Show/Hide Help

\* Select file to upload: Choose File No file chosen

Upload

Back Next

The image shows a screenshot of the 'Upload Supporting Documents - Gross Income' section. It includes instructions, allowed file types, and fields for document type, wages, and file selection. The 'Next' button at the bottom is circled in red.

Please account for the parts of your total wages, salaries, tips, etc. the system will compare the sum to the total provided above. If there is a difference a box will appear for you to provide an explanation for your situation. If the sum of the parts match your total an explanation is not required.

NOTE: You MUST account for and upload your Travel Pay W2/W2C or you will be unable to move to the next screen.

Select the Next button to move to the next tab.

On the State Tax tab (Step 5 of 9), select if you are seeking RITA for state taxes using the radio button.

If no, select the Next button to move to the next tab.

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State Income Tax

Step 5 of 9

Note: In some circumstances, an employee may incur a state income tax liability on moving expense reimbursements in more than one state. For example, an employee may incur taxes on moving expense reimbursements in one state because of residency in that state, and in another state because that particular state taxes income earned within its jurisdiction irrespective of whether the employee is a resident.

✱ Are you seeking RITA for state taxes      ☐ Yes ☒ No

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Next

If yes, select the number of states using the radio buttons, 1 or 2 states.

Select the states from the drop down menu(s).

Input any Locality/Municipality and corresponding information in the appropriate boxes as applicable.

**NOTE:** Most travelers will not claim Locality/Municipality as there are only a very few areas that tax travel reimbursements.

If 2 states are selected, be sure to read and accurately respond to the questions at the bottom of the screen.

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**State Income Tax** Step 5 of 9

**Note:** In some circumstances, an employee may incur a state income tax liability on moving expense reimbursements in more than one state. For example, an employee may incur taxes on moving expense reimbursements in one state because of residency in that state, and in another state because that particular state taxes income earned within its jurisdiction irrespective of whether the employee is a resident.

\* **Are you seeking RITA for state taxes** ☒ Yes ☐ No

**Note:** The follow questions must be answered to determine state marginal tax rate used to compute your RITA. If you do not know the answers, please consult your tax preparer for assistance.

\* **Number of States** ☐ 1 State ☒ 2 States

\* **State 1:** Alabama

**Locality/Municipality**  
Note: Enter the name of the locality or municipality(ies), if any, where you incurred an additional tax liability as a result of moving expense reimbursements

**Local Tax Rate Percentage:**  
Note: Typically, local income tax rates do not exceed 4%; please verify with your tax consultant or tax forms.

**Local Percent of:**

\* **State 2:**

**Locality/Municipality**  
Note: Enter the name of the locality or municipality(ies), if any, where you incurred an additional tax liability as a result of moving expense reimbursements

**Local Tax Rate Percentage:**  
Note: Typically, local income tax rates do not exceed 4%; please verify with your tax consultant or tax forms.

**Local Percent of:**

\* **Did both states tax the same portion of your reimbursement?** ☐ Yes ☒ No

\* **Did either state allow for an adjustment or credit of other income taxes paid to the other state?** ☐ Yes ☒ No

\* **Did a state treat a moving expense reimbursement as taxable even though the same expense is nontaxable under federal tax rules?** ☐ Yes ☒ No

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Select the Next button to move to the next tab.

On the Certified Statement tab (Step 7 of 9), please read the Declaration as it is part of the Certified Statement of Income Tax and Filing Status that must be signed prior to submission.

Your DD 1351-2 and Certified Statement of Income Tax and Filing Status have been created based upon your input in the previous tabs. Please download and review them for accuracy prior to signing.

Once both have been signed, there will be green checkmarks next to them, select the Next button to move to the next tab.

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**Declaration** Step 7 of 9

The above information is true and accurate to the best of my (our) knowledge. I (we) agree to notify the appropriate agency official of any significant changes to the above so that appropriate adjustments to RITA can be made.

I (we) further agree that if the 12-month service agreement required by 41 CFR 302-2.15 is violated, the total amount of the RITA will become a debt due to the United States Government and will be repaid according to agency procedures.

**Signature**

| Forms                                                 | Download                 | Signature            |
|-------------------------------------------------------|--------------------------|----------------------|
| DD1351-2 Travel Voucher ✓                             | <a href="#">Download</a> | <a href="#">Sign</a> |
| Certified Statement of Income Tax and Filing Status ✓ | <a href="#">Download</a> | <a href="#">Sign</a> |

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On the Misc tab (Step 8 of 9), you will see any differences from the Federal Tax tab displayed and have the opportunity to add any additional explanations and/or remarks as needed. If you have nothing to remark, please input N/A.

You may skip the Reviewer Name and Phone Number at this time.

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**Miscellaneous Information** Step 8 of 9

Specify any general remarks regarding this voucher:

Remaining Characters: 800

**Reviewer Name:**

**Reviewer Phone Number:**

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Select the Next button to move to the next tab.

On the View/Print Voucher tab (Step 9 of 9), you are provided a list of supporting documents that must accompany your DD1351-2 and Certified Statement. Upload your supporting documents in the same manner you previously uploaded your W2/W2Cs.

**NOTE:** PLEASE UPLOAD YOUR COMPLETE SET OF ORDERS AND ANY AMENDMENTS ALONG WITH SUPPORTING DOCUMENTS LISTED OR YOUR CLAIM MAY BE RETURNED WITHOUT PAYMENT.

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**View/Print Voucher** Step 9 of 9

Based on your responses to the associated questions throughout the SmartVoucher it has been determined that your travel package will require the following documentation:

| Item Number | Documents                      | Comments                                                                                              |
|-------------|--------------------------------|-------------------------------------------------------------------------------------------------------|
| 1           | Travel Order 123789            | In addition to this travel order, please ensure you include all corresponding amended orders.         |
| 2           | Completed Federal Income Taxes | Pages pertaining to wages, tips and other compensation, and any deductions associated with your move. |
| 3           | All W2s/W2Cs                   | include Spouse's if Married Filing Jointly                                                            |
| 4           | Completed State Income Taxes   | Pages pertaining to wages, tips and other compensation, and any deductions associated with your move. |
| 5           | Completed SF1199A              | Direct Deposit Sign-up Form.                                                                          |

PLEASE UPLOAD YOUR COMPLETE SET OF ORDERS AND ANY AMENDMENTS ALONG WITH SUPPORTING DOCUMENTS LISTED ABOVE OR YOUR CLAIM MAY BE RETURNED WITHOUT PAYMENT.

**Travel Voucher Attachments**

DO NOT UPLOAD DOCUMENTS THAT CONTAIN A DIGITAL SIGNATURE

Allowed file types: bmp,gif,jpeg,pdf,pjpeg,png

File size Limit: 2 mb

Select a file to upload: 

Choose File No file chosen

Upload

| File Name               | Download                 | Delete                 |
|-------------------------|--------------------------|------------------------|
| Payroll W2 - PDF.pdf    | <a href="#">Download</a> | <a href="#">Delete</a> |
| Travel Pay W2 - PDF.pdf | <a href="#">Download</a> | <a href="#">Delete</a> |

**NOTE:** If your filing status is Married Filing Jointly, you will be required to print your Certified Statement with your electronic signature, have your spouse sign, scan and upload with your supporting documents.



# SmartVoucher



## System Temporarily Unavailable

SmartVoucher is having trouble processing your request at this time. Please try again later.

[Back to Menu...](#)

If you receive this message, "System Temporarily Unavailable", while you are attempting to upload your supporting documents, there is a problem with the file that you are attempting to upload.

If your file contains any "active" digital signatures (signature box and "Click to Sign" arrow are visible), you must "flatten" the file prior to upload.

1. Open PDF file
2. Select Print from the File menu
3. Select Microsoft Print to PDF from the Printer dropdown list
4. Click on the Print button
5. Save file where it can be retrieved to upload into goDocs

This prints and scans the PDF to "flatten" the digital signatures, signature blocks may still be visible however the signatures will not be able to be manipulated.

Once you have uploaded all of your supporting documents you may select View Travel Voucher and/or View Certified Statement to see your completed forms and attachments prior to submitting your claim. Once you are satisfied with your claim and attachments, click the Sign box, and select the Submit Travel Voucher button. This will send your claim packet to the reviewer for review and approval.

You will see what you submitted on the Menu tab.

#### Instructions for Opening PDF

To view and print your travel claim, click on the **View Travel Voucher** button below.  
When the File Download dialog box appears, do the following steps:

- Click **Open**
- Select **Print...** from the menu.
- Once you have printed or saved it to your hard drive, check the 'X' in the upper right hand corner to close the window.

#### Additional Information

Please ensure any changes made throughout this process are reflected on your voucher prior to submission.

If you want to view or change your claim, click the 'Menu' tab and all the travel claims created via SmartVoucher will be listed.  
Click on the 'Edit' link next to the travel claim that you would like to view/edit with the applicable Travel Order.

To create a new travel claim, click on the 'Create New Voucher' button and follow the instructions.

To create a supplement travel claim, click on the 'Supplemental Voucher' button and select the travel claim that you would like to supplement with the applicable Travel Order.

[Have a question or comment? Your opinions are very important to us. Click here to submit an ICE Survey.](#)

#### Signature

By clicking "Submit Travel Voucher" you are legally signing this document to be submitted for routing and approval.

☐ Sign

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[View Travel Voucher](#)

[View Certified Statement](#)

[Submit Travel Voucher](#)

#### Need help?

1. Contact our Customer Care Center at 1-888-DFAS411 or 1-888-332-7411, Monday – Friday between the hours of 0800-1700 Eastern Time, or
2. Visit our website at <https://www.dfas.mil/CivilianEmployees/Civilian-Permanent-Change-of-Station-PCS/>, or
3. Submit your question via AskDFAS at <https://corpweb1.dfas.mil/askDFAS/custMain.action?mid=6>.