

Evacuation Travel Voucher Instructions. Ensure you are using the DD 1351-2 dated May 2011

Applicable for: Civilians (Not on TDY orders) and their dependents; Military dependents

Soldiers and Civilians on TDY orders (working during evacuation) will complete their authorizations / orders separately in DTS

1. Select EFT

Split Disbursement Box. If you used a government travel card to pay for any expenses or withdraw cash, select this box and put the balance of the card on the line next to the \$ sign. (Civilian Employees only; Military and Civilian dependents cannot apply a Split disbursement)

2. Last name, First name, Middle Initial. (Civilian employee if not on TDY orders, Eldest Military dependent or Eldest dependent if Civilian employee is on TDY orders)

3. Grade/Rank, or DEP for (Dependent)

4. Full SSN- (Must be the SSN for the individual listed in Box 2)

5.

- Select member/employee if the voucher is only for a DoD civilian employee;

- Select Dependent(s) if the voucher is for either dependent(s) of Soldiers or dependent(s) of DoD civilians;

- Select member/employee and Select Dependents if the voucher is for DoD civilian employee and dependent(s)

6 a-d. Fill out home address in applicable blocks. Must reside in a mandatory evacuation location.

6e. Use employee's/sponsors @mail.mil email address

7. Phone #

8. Fill in from DA1610/Orders

9. Should be left blank unless there was an advance provided.

10 a-e. Leave Blank

11. List sponsor's (Soldier or DoD Civilian) unit / organization

12a-c. Check accompanied if applicable. Add all authorized dependents. Correct dates of birth or marriage are important to compute entitlements.

13. Should be same as home address. If evacuated from another area besides home, confirm with your unit that you are authorized reimbursement. If so, list that location and ensure it is reflected in the order.

14. NO

15a. Fill in applicable dates for each stop. The travel dates should match the timeframe covered in the evacuation memo and DD1610. There is no reimbursement authorized before or after these dates.

15b. First line should be the home address that was evacuated; subsequent lines should list safe haven location(s) (city, state, zip). Use multiple lines if you stayed at different locations each day. The last line should be back to the home address.

15c. Most should be using GP for Government Plane or CP for Commercial Plane. For all other travel, or travel/ to or from the airport please use the applicable mode of transportation:

First Digit:

GTR/TKT or CBA - T

Government Transportation - G

Commercial Transportation (Own expense) - C

Privately Owned Conveyance (POC) - P

Second Digit:

Automobile - A

Motorcycle - M Bus –

B Plane - P Rail –

R Vessel – V

15d. Reason for stop should be TD at the safe haven location(s). Upon return to the home address it should be MC.

15e. Add applicable lodging cost for each night. A receipt must be included to receive reimbursement. There is no lodging reimbursement for staying with friends or relatives. Lodging or room taxes are claimed separately as a reimbursable expense in Block 18.

15f. Only terminal mileage needs to be claimed (travel to/from airport, bus station, etc), the official distance for all other travel will be computed by DFAS Rome.

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16.

- Select Own/Operate if driving your own vehicle or fully paying for the vehicle expenses.

- Select Passenger if you rode with someone else who paid for the vehicle expenses.

17. Select the duration of the travel / time gone from your home location.

18a. Enter the date of the expense

18b. Enter authorized expenses

18c. Enter the amount of the expense. Lodging/Room taxes here if applicable. Some expenses that **should not** go on here are: Gas (reimbursed separately under mileage); Food (reimbursed separately as per diem); Phone calls/pet expenses/Credit card fees/laundry (included in the \$5/day incidental expenses portion of per diem and can't be reimbursed separately, even if expense exceeded \$5/day).

18d. Field is for the supervisor or resource manager to adjust if the traveler is claiming more than authorized.

19. Claim how many meals, if any, you were provided by the government each day. This includes any MREs you received, whether consumed or not.

20a-b. The person whose name is in Block 2 signs/dates here.

21c-f. The reviewer should be the same person that signed in block 18 of the travel order (DA 1610). This person is a level 20 approving official in the Defense Travel System (DTS). This individual must validate the information in the claim and can be held liable for approving incorrect vouchers.

21a-d. Leave Blank

22. Refer to JTR for Funding Info

23-28. Leave blank

29. Enter in any additional remarks on the back as applicable.

Use the 1351-2 c (continuation sheet) if required.