

# PROMISSORY NOTE FOR MOVING EXPENSE ADVANCE

**Original, completed and signed Request for Moving and Relocation Advance (PeoplePay form) must be attached.**

## PERSONAL INFORMATION

Last Name:		First Name:		Middle Name:
Social Security Number:	UMID:	Department:		

## PROMISSORY NOTE AGREEMENT

In consideration of the advance to me for moving expenses by the University of Michigan in the sum of \_\_\_\_\_ Dollars (\$ \_\_\_\_\_)

To facilitate my employment with the University, I \_\_\_\_\_ hereby promise to pay to the order of The Regents of the University of Michigan, a Michigan constitutional corporation, any portion of such advance which is not utilized for moving expenses, as approved by the University, or which is not substantiated with appropriate receipts within 90 days from the signature date of this Promissory Note.

To the extent that such a portion exists, I authorize the University Payroll Office to deduct the full amount thereof from my first regularly scheduled paycheck after the 90-day period from the signature date of the Promissory Note. If it is necessary to deduct the amount over several paychecks to comply with the State of Michigan regulations, I authorize the University Payroll Office to deduct equal installments until the full amount is recovered.

Name (please print) \_\_\_\_\_

Signature of Faculty/Staff Member:	Date:
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Address:	City:	State:	Zip Code:
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Check mailed to above address: <input type="checkbox"/> Yes <input type="checkbox"/> No	Payroll pickup: <input type="checkbox"/> Yes <input type="checkbox"/> No
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University Department:	Shortcode:
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Campus Address:	Campus Zip:	Campus Phone:
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Department Contact (please print):	Telephone:
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## INSTRUCTIONS FOR COMPLETING THE PROMISSORY NOTE

**Standard Practice Guide for reference:**  
SPG 201.68 – Moving and Relocation Expenses (<http://spg.umich.edu/pdf/201.68.pdf>)

**Related Forms:**  
Request for Moving and Relocation Advance Form – PeoplePay  
Reimbursement/Reconciliation of Moving and Relocation Expenses Form – PeoplePay

**Guidelines for using this form:**

**Department Administrator:** Send PDF file or the form’s URL to faculty/staff member requesting advance. Provide faculty/staff member with the address to which they return the form. When signed form is returned, complete Request for Moving and Relocation Advance form. Send **original copy of Promissory Note**, plus one copy, along with the approved request form to SSC HR, 1000 Victors Way, Ann Arbor, MI 48108.

**Faculty/Staff Member:** Complete the name and address fields on the Promissory Note and mail it, along with a written estimate of your moving costs, to the address provided by the department administrator. Use your legal name in the name fields. Save all receipts related to the move. Original receipts should be submitted to the department administrator to be reconciled with the advance.