



FINANCE BRIEF



IN PROCESSING TO KOREA





OFFICE HOURS



Hours of Operation

Monday: 0900-1630

Tuesday: 0900-1630

Wednesday: 0900-1630

Thursday: **CLOSED ALL DAY DUE TO LTT (Training)**

Friday 0900-1630

**Closed Everyday for lunch (1130 – 1300) and All
Schedule DONSA & Holidays**





Smart Voucher Instructions

Effective **17 April 2023** all finance related requests, questions, and concerns will be processed by unit S1s.

- Soldiers **MUST** create a Customer Relationship Management (CRM) case in IPPS-A.
- CRM cases will automatically be routed to your unit S1.



Process in (CRM) case	BASIC HOUSING ALLOWANCE (BAH)	Enlistment Bonus	Foreign Language Proficiency Bonus (FLPB)
Documents needed	<ul style="list-style-type: none">• Marriage certificate• Birth certificate• DA 5960• Divorce Decree• Orders	<ul style="list-style-type: none">• Annex B• Contract• MOS Certificate/ AIT Graduation Certificate	<ul style="list-style-type: none">• Service Secretary List (SSL)• Defense Language Proficiency Test (DLPT)• Orders (S1)





ATTENTION

The following will be serviced at the local Finance Office:

- ✓ S1 Personnel w/Authorized Access Memo
- ✓ Soldiers w/No Pay Due
- ✓ OHA & Security Deposit Advances / Returns
- ✓ In-Processing / Out-Processing
- ✓ Separations
- ✓ Soldiers w/Statement of Charges or Debt Letters
- ✓ Soldiers w/Travel Pay Issues (Smart voucher)





LAST DUTY STATION ENTITLEMENTS

All entitlements will be stopped, effective on the date of departure from last duty station. Including BAH/OHA

- **Hostile Fire Pay**
- **Save Pay**
- **Demolition Pay**
- **Parachute Duty Pay**
- **Family Separation Allowance**
- **Drill Sergeant Pay**
- **Hazardous Duty/Imminent Danger Pay**
- **Special Duty Assignment Pay**
- **Foreign Language Proficiency Pay**
- **Pay Entitlements terminating from PDS**
- Assignment Incentive Pay – DFAS will stop day prior to Departure from AOR with DA 4187
- Exceptions: Flight Pay for Officers & Soldiers with 18Z MOS





KOREA SPECIFIC ENTITLEMENTS

- OCONUS Cost Of Living Allowance (COLA)
 - ✓ Based on rank, time in service, location, and the daily rate (changes daily).
- Hardship Duty Pay-Location (HDP-L) (ONLY AREA I – Camp Casey)
 - ✓ \$150 for Area I
- Overseas Housing Allowance (OHA)
 - ✓ Go to your local Housing Office to start this entitlement for eligible personnel
- Family Separation Allowance (FSA-R)
 - ✓ \$250 prorated based on 30-day month. (Not authorized for Dual Military couples stationed in Korea or Non-custodial parents)
- Meal Deductions
 - ✓ Unaccompanied E-6 and below unless Unit authorizes otherwise. (Certain Units are preapproved)





MEAL DEDUCTION EXEMPTIONS

The following personnel currently have pre-approved exemption memos filed in our office:

- CID personnel
- MP personnel
- Joint Security Area (JSA) personnel
- 8th Army Band
- SOC-KOR
- 168th MMB & 549th Hospital Center

UIC's not covered by the memos on file will have to submit an individual ETP request using PAR (signed by BC)





BASIC HOUSING ALLOWANCE (BAH)

- Your BAH will remain the same as your **last Permanent Duty Station**. If you relocated your dependents, you must submit a copy of your dependent travel voucher and your PCS orders.

***IF ORDERS ARE INCORRECT, THEY MUST BE AMENDED!**

Printout your assignment instruction from IPPS-A/

Need memorandum from MPD





BAH FRAUD

- Soldiers who are listing zip codes with high BAH rates even though their dependents are not located there.
- Hot location - San Francisco, Los Angeles, San Diego, Chicago, New York City, etc.
- BAH fraud violates the following UCMJ articles: Article 107, UCMJ (False Official Statement) and Article 121, UCMJ (Larceny). This is because signing the finance form with a false dependent address is the false statement, and the resulting reception of BAH funds from DFAS is larceny. Disposition of BAH fraud cases can result in Article 15, separation, GOMOR, or court-martial. Additionally, the Department of Treasury will then carry out their own process to recover the entire amount distributed to the Soldier, not just the difference between what they received and what they should have received.





BASIC HOUSING ALLOWANCE (BAH)

- Non-Custodial Parents:
 - Only authorized BAQ-Diff
- Unaccompanied Dual Military:
 - SM receiving with dependent BAH rate is authorized BAH
 - SM receiving the without dependent BAH rate is not authorized BAH





Family Separation (FSA) for Dual Military Couples

Soldiers must provide proof of enrollment in the MACP (Married Army Couples Program)

Acceptable Proof:

- **Total Army Personnel Database (TAPDB) MACP Printout**
- **Soldier Talent Profile (STP) Printout reflecting MACP enrollment**





DISLOCATION ALLOWANCE (DLA)

Authorized:

- SM who relocated dependents. (Must be authorized in PCS orders)
- SM with Command Sponsorship (CSP)
- SM who reside off post
- Married, and brought some of your household to Korea (barracks/SLQ)

Not Authorized:

- Single SM assigned to barracks
- Single SM assigned to senior leader quarters (SLQ)

DLA is reimbursed through the Smart Voucher





PET EXPENSES

- Pet Expenses are reimbursable ONLY when authorized in PCS Orders.
- If this authorization is not in your PCS orders, contact MPD on 3rd floor of Maude Hall for more information.





TLE VS TLA

Temporary Lodging Expense (TLE)

- Authorized 7 days from CONUS to OCONUS
- Reimbursed through smart voucher.
- Payment shown on AOP
- Lodging within 75 miles from your losing station.

Temporary Lodging Allowance (TLA)

- Memorandum from housing authorizing TLA
- Authorized 10 days but can be extended by the Housing office approval.
- Reimbursed through local finance office.
- Payment shown on LES





ADVANCE PAY

- Advance on your base pay minus taxes and other monthly deductions.
- Request within 30 days prior to departure or 60 days from arrival at PDS.
- Request submitted through DD Form 2560.
- For Approval:
 - ✓ SPC and above can sign for themselves
 - ✓ PFC and below need Commander's signature (O-3 or above)
 - ✓ O-5 or above must sign for 2nd advance pay in same PCS (e.g., 1 advance prior to PCS, 1 advance after arrival)





In Processing Finance





LES REVIEW

DEFENSE FINANCE AND ACCOUNTING SERVICE MILITARY LEAVE AND EARNING STATEMENT																				
ID	NAME (LAST, FIRST, MI)			SOC. SEC. NO.	GRADE	PAY DATE	YRS SVC	ET5	BRANCH	ADSN/DESN	PERIOD COVERED									
ENTITLEMENTS			DEDUCTIONS				ALLOTMENTS				SUMMARY									
TYPE			AMOUNT				TYPE				AMOUNT									
A B C D E F G H I J K L M N O P Q R S T U V W X Y Z	10			11				12				13								
												14								
												15								
												16								
												17								
												18								
												19								
												20								
												21								
												22								
TOTAL			20				21				23									
											24									
LEAVE			24	25	26	27	28	29	30	31	32	FED TAXES		33	34	35	36	37	38	
FICA TAXES			WAGE PERIOD		SOC WAGE YTD		SOC TAX YTD		MED WAGE YTD		MED TAX YTD		STATE TAXES		44	45	46	47	48	49
PAY DATA			50	51	52	53	54	55	56	57	58	59	60	61	62					
Thrift Savings Plan (TSP)			BASE PAY RATE		BASE PAY CURRENT		SPEC PAY RATE		SPEC PAY CURRENT		DIC PAY RATE		DIC PAY CURRENT		BONUS PAY RATE		BONUS PAY CURRENT		70	
			CURRENTLY NOT USED		TSP YTD DEDUCTIONS		DEFERRED		EXEMPT		CURRENTLY NOT USED		75							
REMARKS			YTD ENTITLE				YTD DEDUCT													
76			77				78													

If ADSN shows 9999, you need to be in processed

Korea ADSN is 6411.

If you see 9999 for 3 consecutive month's you need to see Finance ASAP!

COLA Rate:

- 9: SM with meal deductions
- 0: SM without meal deductions
- 1 – 5: number of CSP dependents

LES remarks will tell you for which area you are receiving COLA





Required Documents to In Process Finance

- Coversheet
- Travel Voucher
- 1 Complete Set of PCS Orders (with amendments if applicable)
- Leave Forms with Control Number (block 14 & 16 must be filled out and signed)
- 1 Copy of Pin Point Orders
- DD1610 (if applicable)
- DD 1561 FSA (if applicable)
 - Dual Military Requires MACP 4187





Coversheet

★ DATE: _____

BRIEF / WINDOW

A Detachment 176th FMSU

FINANCE IN-PROCESSING DOCUMENT COVERSHEET

★ NAME: LAST NAME, FIRST ★ SSN: 123-45-6789 ★ RANK: SGT

★ EMAIL: xxx.MIL@ARMY.MIL or personal email

Single Married Dual Military Single W/ Dependents

HRAP P-TDY TDY Enroute

SB03	START		3501/04	START	
	STOP			GOV ASG	
	LV TYPE			GOV ADQ	
	LV AUTH #	IN06411		DEP BAQ	
				SLST DEP	

Circle all that applies to you.





ABSENCE REQUEST = AUTHORIZATION AND APPROVAL DATA

ABSENCE REQUEST – AUTHORIZATION AND APPROVAL DATA			
<p>INSTRUCTIONS TO SERVICE MEMBER</p> <p>AUTHORITY FOR ABSENCE: This form contains the pertinent information that authorizes you to be away from your station or post. You must carry this form while on absence.</p> <p>CHANGES: A Member who desires changes in authorized absence or does not begin absence on schedule will notify commander.</p> <p>REPORTING: A Member will report to duty station not later than 2400 on the last day of absence (even if PCS orders contain a later reporting date)</p> <p>IMPORTANT: This form must remain in the Member's possession at all times while absent from duty station. To reprint the form, log into the IPPS-A system go to My Absences > View/Update Requests and find the appropriate request to print.</p>			
MEMBER ABSENCE INFORMATION – TRANSACTION NUMBER: [REDACTED]			
1. NAME [REDACTED]		2. CoD ID [REDACTED]	
3. ABSENCE TYPE CHG - Chargeable Absence		4. ABSENCE REASON PCS - Abs in Conjunction w/PCS	
5. ABSENCE BEGIN DATE 2023-03-01	6. ABSENCE END DATE 2023-06-10	7. PLANNED DEPARTURE DATE (Chargeable Absence Only) 2023-03-01	8. PLANNED RETURN DATE (Chargeable Absence Only) 2023-06-10
9. ABSENCE ADDRESS (include ZIP Code) AND TELEPHONE NUMBER Contact Name: [REDACTED] Contact Phone: [REDACTED] GEOLOC Code: [REDACTED] Address Details: [REDACTED] [REDACTED]		10. DEPARTMENT/IC & LOCATION INFORMATION 00462165/WAH4T0 - 0002 AR HQ CO HQ AND SPT [REDACTED]	
11. REQUESTOR COMMENTS: I will be reporting early, tentative date being 10 April 2023			
12. SUPERVISOR NAME [REDACTED]		13. APPROVER NAME [REDACTED]	
		<div style="border: 1px solid black; padding: 5px; text-align: center;"> <p>RECEIVED</p> <p>2023 -02- 27</p> <p>14. APPROVAL STATUS: APPROVED</p> </div>	

- Block 1 Full name
- Block 2 Full DODID #
- Block 3 Must read CHG- Chargeable Absence
- Block 4 Must read PCS – Abs in Conjunction w/PCS
- Block 5 Absence begin date (DEPARTURE DATE)
- Block 6 Absence end date (ARRIVAL DATE)
- Block 7 & 8 must reflect block 5 & 6
- Block 9 SM leave address
- Block 10 SM UIC
- Block 11 Remarks (if applicable)
- Block 12 Supervisor name
- Block 13 Supervisor approval
- Block 14 **MUST READ “APPROVED”**

Please be aware If extra leave days are charged. Contact your unit S1 for corrections. Then follow up with finance.





DA 31

REQUEST AND AUTHORITY FOR LEAVE

This form is subject to the Privacy Act of 1974. For use of this form, see AR 600-8-10.
The proponent agency is DCS, G-1. (See instructions by clicking on the instructions button.)

1. CONTROL NUMBER

CONTROL NUMBER

PART I - REQUESTOR INFORMATION

2. NAME (Last, First, Middle Initial)	3. DOD ID	4. RANK	5. DATE (YYYYMMDD)
---------------------------------------	-----------	---------	--------------------

10a. ACCRUED LEAVE (CR BAL)	10b. CHARGEABLE LEAVE REQUESTED				10c. NON-CHARGEABLE ABSENCE REQUESTED			
	FROM (YYYYMMDD)	DAYS REQUESTED	TO (YYYYMMDD)	ADVANCE	EXCESS	FROM (YYYYMMDD)	DAYS REQUESTED	TO (YYYYMMDD)
				NA	NA			

REQUESTOR / SUPERVISOR / APPROVING AUTHORITY SIGNATURES

11. SIGNATURE OF REQUESTOR (Supervisor can sign for requestor when requestor is not available to sign.)	DATE
YOUR SIGNATURE	

12. SUPERVISOR NAME	TITLE	RANK/GRADE	RECOMMENDATION	SIGNATURE	DATE
SUPERVISOR NAME	DUTY POSITION		<input type="checkbox"/> APPROVAL <input type="checkbox"/> DISAPPROVAL	SIGNATURE	
13. APPROVING AUTHORITY NAME	TITLE	RANK/GRADE	ACTION	SIGNATURE	DATE
SUPERVISOR NAME	DUTY POSITION		<input type="checkbox"/> APPROVED <input type="checkbox"/> DISAPPROVED	SIGNATURE	

14. DEPARTURE - AUTHORITY SIGNATURE					
a. DATE YYMMDD	b. TIME	c. NAME DEPARTURE AUTHORITY	d. TITLE DUTY POSITION	e. SIGNATURE SIGNATURE	f. DATE

15. EXTENSION - APPROVAL AUTHORITY SIGNATURE					
a. NUMBER DAYS	b. DATE APPROVED	c. NAME APPROVAL AUTHORITY	d. TITLE	e. SIGNATURE	f. DATE

16. RETURN - AUTHORITY SIGNATURE					
a. DATE YYMMDD	b. TIME	c. NAME RETURN AUTHORITY	d. TITLE DUTY POSITION	e. SIGNATURE SIGNATURE	f. DATE

Personal who have submitted absence leave through IPPSA (PAR). May be charged a few days extra. If this happens. Please contact your S1 to fix the situation. Finance is not responsible for the transactions in IPPSA.

ALL EXTENSIONS MUST BE APPROVED BY YOUR LOSING OR GAINING COMMANDER





Completing the DD Form 1561 (FSA)

BLOCK 1 – 4: Self Explanatory

- NAME
- GRADE: E /O (Not your RANK)
- DOD ID
- BRANCH and ORGANIZATION

STATEMENT TO SUBSTANTIATE PAYMENT OF FAMILY SEPARATION ALLOWANCE (FSA)			
PRIVACY ACT STATEMENT			
AUTHORITY:	Title 37, U.S. Code, Section 427.		
PRINCIPAL PURPOSE:	To evaluate member's application for FSA.		
ROUTINE USES:	a. Serves as substantiating document for FSA payments and input into the member's pay account. b. Provides an audit trail for validating propriety of payments and to assist in collecting erroneous payments. c. Provides a record in service member's pay account and for safekeeping.		
DISCLOSURE:	Disclosure of your social security number and other personal information is voluntary. However, if requested information is not provided, FSA will not be considered.		
1. NAME OF MEMBER <i>(Last, First, Middle Initial)</i>	2. GRADE	3. <input type="text" value="DOD ID"/>	4. BRANCH AND ORGANIZATION
→	→ E-5	→	→ ARMY / 19 th HRC
PART I - MEMBER COMPLETES THIS SECTION TO SUBSTANTIATE ENTITLEMENT TO FSA			





Completing the DD Form 1561 (FSA)

BLOCK 5:

- Mark "X" FSA-R for restricted (unaccompanied) tour.

BLOCK 6:

- Date that you left your dependents for the airport to make your trip to Korea.

BLOCK 7:

- Address where dependents currently reside. Must be a designated location as stated in your orders.

1. NAME OF MEMBER <i>(Last, First, Middle Initial)</i>	2. GRADE	3. DoD ID NUMBER	4. BRANCH AND ORGANIZATION
PART I - MEMBER COMPLETES THIS SECTION TO SUBSTANTIATE ENTITLEMENT TO FSA			
5. TYPE II <i>(X as applicable)</i> <input type="checkbox"/> FSA-T (Temporary) <input type="checkbox"/> FSA-R (Restricted) <input type="checkbox"/> FSA-S (Ship)		6. DATE <i>(DDMMYY)</i> DEPARTED RESIDENCE TO UNIT HOME STATION <i>(Mobilized Members)</i>	
7. COMPLETE CURRENT ADDRESS(ES) OF DEPENDENT(S)			



Completing the DD Form 1561 (FSA)



8. I CERTIFY TO THE FOLLOWING FACTS (X applicable box(es))

- a. I am not divorced or legally separated from my spouse. A/I/W
- b. My dependent child (children) was (were) not in the legal custody of another person when I received my military orders. C/W
- c. My dependent (other than my spouse; see line f. below) is not a member of the military service on active duty. C/D/W
- d. My sole dependent is not in an institution for a known period of over 1 year or a period expected to exceed 1 year. ALL
- e. I am claiming FSA for my parent(s) for whom I have a current and approved dependency status and am residing with, and I maintain a residence(s) for my dependent(s). I have assumed the liability and responsibilities thereof at the address(es) shown above, where I likely reside during periods of leave or such other times as my duty assignment may permit. D
- f. I am married to another military member currently serving on active duty and my spouse was was not residing with me immediately before being separated by execution of my military orders. W/I
Spouse's SSN: _____ Branch and Component: _____
- g. My last TDY or deployment, if any, was was not within the last 30 days from this TDY or deployment.

BLOCK 8: Mark all that applies to you.

9. I understand that I must notify my commanding officer immediately upon any change in dependency status and if my sole dependent or all of my dependents move to or near this station or if my dependent(s) visit at or near this station for more than 90 continuous days (more than 30 continuous days in the case of FSA-T (Temp) or FSA-S (Ship) while I am in receipt of FSA.

BLOCK 9: Sign and date.

a. DATE (DDMMYY)

b. SIGNATURE OF MEMBER

PART II CERTIFYING OFFICER COMPLETES THE APPROPRIATE SECTION(S) BELOW





Documents for In Processing

The DD 1351-2 you are about to complete is only so we can arrive you in country.

This Travel Voucher will not be submitted to DFAS for reimbursement.





Completing the Travel Voucher for In Processing

TRAVEL VOUCHER OR SUBVOUCHER

Read Privacy Act Statement, Penalty Statement, and Instructions on back before completing form. Use typewriter, ink, or ball point pen. **PRESS HARD. DO NOT** use pencil. If more space is needed, continue in remarks.

1. PAYMENT

Electronic Fund Transfer (EFT)

Payment by Check

SPLIT DISBURSEMENT: The Paying Office will pay directly to the Government Travel Charge Card (GTCC) contractor the portion of your reimbursement representing travel charges for transportation, lodging, and rental car if you are a civilian employee, unless you elect a different amount. Military personnel are required to designate a payment that equals the total of their outstanding government travel card balance to the GTCC contractor.

NOTE: A split disbursement is only necessary when a GTCC is used while on official travel for the Government.

Pay the following amount of this reimbursement directly to the Government Travel Charge Card contractor: \$ _____

2. NAME (Last, First, Middle Initial) (Print or type)

Smith, John

3. GRADE

E5

4. SSN

123-45-6789

5. TYPE OF PAYMENT (X as applicable)

TDY

Member/Employee

PCS

Other

Dependent(s)

DLA

6. ADDRESS. a. NUMBER AND STREET

b. CITY

c. STATE

d. ZIP CODE

➤ Block 2-4: NAME, GRADE, SSN





Completing the Travel Voucher for In processing

- **Block 6e:** The email you check frequently.
- **Block 7:** Daytime phone number
- **Block 8:** Travel order number is located in the top left-hand corner on PCS Orders.

e. E-MAIL ADDRESS Email@hotmail.com OR Email@gmail.com OR Email.mil@army.mil			10. FOR D.O. USE ONLY
7. DAYTIME TELEPHONE NUMBER & AREA CODE 010-1234-5678	8. TRAVEL ORDER/AUTHORIZATION NUMBER 012-345	9. PREVIOUS GOVERNMENT PAYMENTS/ ADVANCES	a. D.O. VOUCHER NUMBER
11. ORGANIZATION AND STATION your gaining unit			b. SUBVOUCHER NUMBER





Completing the Travel Voucher for In Processing

e. E-MAIL ADDRESS Email@hotmail.com OR Email@gmail.com OR Email.mil@army.mil			10. FOR D.O. USE ONLY		
7. DAYTIME TELEPHONE NUMBER & AREA CODE 010-1234-5678		8. TRAVEL ORDER/AUTHORIZATION NUMBER 012-345	9. PREVIOUS GOVERNMENT PAYMENTS/ ADVANCES		a. D.O. VOUCHER NUMBER
11. ORGANIZATION AND STATION your gaining unit					b. SUBVOUCHER NUMBER
12. DEPENDENT(S) (X and complete as applicable)			13. DEPENDENTS' ADDRESS ON RECEIPT OF ORDERS (Include Zip Code)		c. PAID BY
<input type="checkbox"/> ACCOMPANIED		<input checked="" type="checkbox"/> UNACCOMPANIED			
a. NAME (Last, First, Middle Initial)	b. RELATIONSHIP	c. DATE OF BIRTH OR MARRIAGE			

➤ **Block 11:** Unit of Assignment, if you don't know, refer to your PCS Order

➤ **Block 12:** Mark unaccompanied if you didn't move your dependents or you don't have dependents.





Completing the Travel Voucher for In Processing

e. E-MAIL ADDRESS			10. FOR D.O. USE ONLY	
7. DAYTIME TELEPHONE NUMBER & AREA CODE		8. TRAVEL ORDER/AUTHORIZATION NUMBER	9. PREVIOUS GOVERNMENT PAYMENTS/ ADVANCES	
11. ORGANIZATION AND STATION			a. D.O. VOUCHER NUMBER	
12. DEPENDENT(S) <i>(X and complete as applicable)</i>			b. SUBVOUCHER NUMBER	
<input checked="" type="checkbox"/> ACCOMPANIED		<input type="checkbox"/> UNACCOMPANIED		
a. NAME <i>(Last, First, Middle Initial)</i>		b. RELATIONSHIP	c. DATE OF BIRTH OR MARRIAGE	
			14. HAVE HOUSEHOLD GOODS BEEN SHIPPED? <i>(X one)</i>	
			<input type="checkbox"/> YES <input type="checkbox"/> NO <i>(Explain in Remarks)</i>	
			c. PAID BY	
			d. COMPUTATIONS	

- **Block 11:** Unit of Assignment, if you don't know, refer to your PCS Order
- **Block 12:** Mark accompanied if your dependents moved based on your orders.





Completing the Travel Voucher for In Processing

e. E-MAIL ADDRESS Email@hotmail.com OR Email@gmail.com OR Email.mil@army.mil			10. FOR D.O. USE ONLY	
7. DAYTIME TELEPHONE NUMBER & AREA CODE 010-1234-5678	8. TRAVEL ORDER/AUTHORIZATION NUMBER 012-345	9. PREVIOUS GOVERNMENT PAYMENTS/ ADVANCES	a. D.O. VOUCHER NUMBER	
11. ORGANIZATION AND STATION your gaining unit			b. SUBVOUCHER NUMBER	
12. DEPENDENT(S) (X and complete as applicable)			13. DEPENDENTS' ADDRESS ON RECEIPT OF ORDERS (Include Zip Code)	
<input checked="" type="checkbox"/> ACCOMPANIED	<input type="checkbox"/> UNACCOMPANIED		c. PAID BY	
a. NAME (Last, First, Middle Initial)	b. RELATIONSHIP	c. DATE OF BIRTH OR MARRIAGE	Conus dependents Relocation Address of dependents when Orders were received	
Spouse				
Tigger				
Baby Yoda				
Simba				
14. HAVE HOUSEHOLD GOODS BEEN SHIPPED? (X one)			d. COMPUTATIONS	
<input type="checkbox"/> YES			<input type="checkbox"/> NO (Explain in Remarks)	

➤ **Block 11:** Unit of Assignment, if you don't know, refer to your PCS Order

➤ **Block 12:** Mark accompanied if your dependents moved based on your orders.

List all CSP dependents that are here in country with you.





Completing the Travel Voucher for In Processing

Your departure date must match your Absence Request form (Leave Form).

15. ITINERARY						f.
a. DATE		b. PLACE (Home, Office, Base, Activity, City and Country, etc.)				POC MILES
23						
BLK 14	DEF	LAST DUTY STATION	PA			
10 Aug	ARR	LEAVE or TDY or VPC or HRAP		LV/ TD/AT		
22 Aug	DEF		PA			
22 Aug	ARR	AIT DUTY LOCATION		AD		
26 Aug	DEF		GB			
26 Aug	ARR	FIRST CONUS/OCONUS AIRPORT		AT		
26 Aug	DEF		CP			
26 Aug	ARR	LAST CONUS/OCONUS AIRPORT		AT		
27 Aug	DEF		GP			
28 Aug	ARR	KOREA (OSAN / INCHEON)		AT		
28 Aug	DEF		GB			
BLK 16	ARR	ASSIGNED DUTY LOCATION ON PCS ORDERS		MC		(1) Per Diem
	DEF					
						(3) Mileage

15 (c)

- PA: Private Automobile
- CA: Commercial Automobile
- CP: Commercial Plane
- GP: Government Plane
- GB: Government Bus
- TP: Non GTCC booked plane

15 (d)

- LV: leave
- TD: TDY Enroute
- AT: Awaiting Transportation
- AD: Authorized Delay(over 24 hours)
- MC: Mission Complete

The date you arrived in country.

EVERY BLOCK IN 15B MUST BE CITY, STATE, POST LOCATION, OR AIRPORT
DO NOT SKIP LINES





Completing the Travel Voucher for In Processing

20.a. CLAIMANT SIGNATURE			b. DATE	
c. REVIEWER'S PRINTED NAME		d. REVIEWER SIGNATURE	e. TELEPHONE NUMBER	f. DATE
21.a. APPROVING OFFICIAL'S PRINTED NAME		g. SIGNATURE	c. TELEPHONE NUMBER	d. DATE
22. ACCOUNTING CLASSIFICATION				
23. COLLECTION DATA				
24. COMPUTED BY	26. AUDITED BY	28. TRAVEL ORDER/ AUTHORIZATION POSTED BY	27. RECEIVED (Payee Signature and Date or Check No.)	28. AMOUNT PAID

DD FORM 1354-2, MAR 2000

PREVIOUS EDITION MAY BE USED

Exception to SF 1012 approved by GRA/IRMS 12-91

➤ **Block 20 (a&b):**

- Sign and date





Pink Slip

FINANCE IN-PROCESS

NOTICE: A DET, 176TH FMSU ACCEPTED [] REJECTED [] your in-process packet.

DATE:

DATE STAMP

REASONS FOR REJECT

- Leave form
- DD 1610
- PP orders
- Orders

*** You must submit the correct, completed packet to the finance office ASAP to be in-processed. Failure to do so will result in incorrect payments and my lead to significant debt or a no pay due (PAY STOP). ***

TRAVEL PAYMENT

Submit for travel pay/reimbursement through Smart Voucher using our Smart Voucher QR on your mobile phone and log in with your myPay username and password. Or follow the link below.
<https://smartvoucher.dfas.mil/voucher/>



SMART VOUCHER SUBMITTED

SV STAMP



Scan for Smart voucher instructions.

*** If dependent/s traveled separately or to a different location, you must file a separate **Dependent Travel Voucher*****



A scenic view of Namsan Tower in Seoul, Korea. The tower is a prominent white structure with a blue observation deck and a tall antenna spire. In the foreground, there is a traditional Korean building with a colorful, ornate roof. The scene is framed by vibrant autumn foliage on the left and lush green trees at the bottom. The sun is shining brightly in the upper left corner, creating a lens flare effect. The text "WELCOME TO KOREA!" is overlaid in the center of the image.

WELCOME TO KOREA!