

## CLAIM FOR ACTUAL MOVING EXPENSES

Print or Type All Information				
1. Name of Claimant(s) Tim Haynie		Parcel No: 13		County: Williamson
<input checked="" type="checkbox"/> Individual Storage Unit #E19		Project: Corridor H/Sam Bass Rd		
2. Address of Property Acquired by Williamson County: 4700 Sam Bass Road Round Rock, Texas 78681		3. Address Moved To: 3019 N Interstate Hwy 35 Round Rock, TX 78664		
Claimant's Telephone No.: 512-400-1006		5. Distance Moved: 4.63 Miles		
4. Occupancy of Property Acquired by Williamson County: From (Date): July 2018 To (Date of Move): Nov 2021		7. Mover's Name and Address:  <b>Self-Move based off approved fee schedule</b>		
<input type="checkbox"/> Owner/Occupant <input checked="" type="checkbox"/> Tenant		9. Amount of Claim:		
6. Controlling Dates		Mo.	Day	Yr.
a. First Offer in Negotiation		05	11	2020
b. Date Property Acquired		05	29	2021
c. Date Required to Move		11	30	2021
8. Property Storage (attach explanation) From (Date): N/A To (Date of Move): N/A		Moving Expenses		\$300.00
Place Stored (Name and Address): N/A		<b>Total Amount</b>		<b>\$300.00</b>
10. Temporary Lodging (attach explanation) From (Date): N/A To (Date of Move): N/A		11. All amounts shown in Block 9 were necessary and reasonable and are supported by attached receipts. Pay of this claim is requested. I certify that I have not submitted any other claim for, or received reimbursement for, an item of expense in this claim, and that I will not accept reimbursement or compensation from any other source for any item of expense paid pursuant to this claim. I further certify that all property was moved and installed at the address shown in Block 3, above, in accordance with the invoices submitted and agreed terms of the move and that all information submitted herewith or included herein is true and correct.		
<div style="display: flex; align-items: center;"> <div style="margin-right: 10px;">11-NOV-2018</div> </div> Signature Claimant				
Date of Claim:		Signature Claimant		
Spaces Below to be Completed by Williamson County				
I certify that I have examined this claim and substantiating documentation attached herewith and have found it to be true and correct and to conform with the applicable provisions of State law. All items are considered to be necessary reasonable expenses and this claim is recommended for payment as follows:				
Amount of \$ 300.00				
<div style="display: flex; align-items: center;"> <div style="margin-right: 10px;">11-11-2021</div> </div> Date		<div style="display: flex; align-items: center;"> </div> Relocation Agent		
Date		Williamson County Judge		



**CERTIFICATION OF ELIGIBILITY**

Project Sam Bass Road  
Parcel: 13

Tenant Name: Tim Haynie

Unit/Space #: E19

**Individuals, Families and Unincorporated Businesses or Farming Operations**

I certify that myself and any other party(ies) with a financial interest in this relocation assistance claim are either:

- Citizens or Nationals of the United States
- or
- Aliens lawfully present in the United States

\* If an Alien lawfully present in the United States, supporting documentation will be required.

Tim Haynie  
Signature

Date: 29 Aug 2021

\_\_\_\_\_  
Signature

Date:

**Incorporated Business, Farm or Nonprofit Organizations**

I certify that I have signature authority for this entity and such entity is lawfully incorporated under the applicable state's laws and authorized to conduct business within the United States.

N/A

\_\_\_\_\_  
Claimant

Date:

**PLEASE COMPLETE, SIGN, DATE AND RETURN**

# RIGHT OF WAY OF TEXAS, LLC

6101 W. COURTYARD DRIVE, BLDG. 1, STE. 125, AUSTIN, TX 78730  
(O) (512) 372-6220 (F) (512) 372-6221

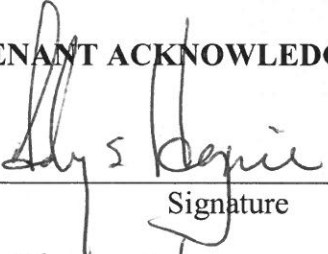
## ACKNOWLEDGMENT BY TENANT

**CORRIDOR H/SAM BASS ROAD**  
**PARCEL 13**  
**SAM BASS STORAGE**  
**UNIT # E19**

Relocation Advisory Services & Assistance:

I have been given a copy of the 90-day notice which explains the available services and entitlements available to me. I am advised that the Relocation Agent will be available to assist me if any questions arise or assistance is needed.

### TENANT ACKNOWLEDGEMENT:

 _____ Signature	<u>28 Aug 2021</u> Date
<u>Tim Haynes</u> Print Name	<u>E19</u> ✓ UNIT

**PLEASE COMPLETE, SIGN, DATE AND RETURN**

