

CLAIM FOR ACTUAL MOVING EXPENSES

Print or Type All Information				
1. Name of Claimant(s) <i>Bobby Sherr</i>		Parcel No: 64		County: Williamson
<input checked="" type="checkbox"/> Personal Property Only		Project: Corridor A1/ SE Loop		
2. Address of Property Acquired by Williamson County: West side FM 3349. South of US 79 Taylor, Texas			3. Address Moved To: <i>1408CR373</i>	
4. Occupancy of Property Acquired by Williamson County: From (Date): <i>2018</i> To (Date of Move): <i>1-22-22</i>			5. Distance Moved: <i>3</i> Miles	
<input type="checkbox"/> Owner/Occupant <input checked="" type="checkbox"/> Tenant			7. Mover's Name and Address: <i>Castillo Construction Round Rock 512-848-0471</i>	
6. Controlling Dates				9. Amount of Claim:
a. First Offer in Negotiation	Mo.	Day	Yr.	
<i>01</i>	<i>26</i>	<i>2021</i>		
b. Date Property Acquired	<i>10</i>	<i>12</i>	<i>2021</i>	
c. Date Required to Move	<i>11</i>	<i>29</i>	<i>2021</i>	
8. Property Storage (attach explanation) From (Date): N/A To (Date of Move): N/A				Moving Expenses \$1,600.00
Place Stored (Name and Address): N/A				Total Amount \$1,600.00
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; justify-content: space-between;"> <div style="width: 40%;"> <p style="margin: 0;"><i>[Signature]</i></p> <p style="margin: 0;">Signature Claimant</p> </div> <div style="width: 40%;"> <p style="margin: 0;"><i>2/15/22</i></p> <p style="margin: 0;">Date of Claim:</p> </div> </div>				
<div style="display: flex; justify-content: space-between;"> <div style="width: 40%;"> <p style="margin: 0;">_____ Signature Claimant</p> </div> </div>				
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 \$ <i>1,600.00</i>				
<i>2-11-2022</i>		<i>[Signature]</i>		
Date		Relocation Agent		
_____ Date		_____ Williamson County Judge		

CERTIFICATION OF ELIGIBILITY

Project Corridor A-1 SE Loop

Parcel: 64

Name: Bobby Skiva

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.

Bobby Skiva
Signature

Date: 2/18/22

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