CLAIM FOR ACTUAL MOVING EXPENSES

| | NES T | | Print or T | Type All Information | |
|--|---------------|----------------|--------------|--|---|
| 1. Name of Claimant(s) Stephany Moore | | | ove | Parcel No: 13 | County: Williamson |
| ARDEN BROOM COLLABILL | | | | | Project: Corridor H/Sam Bass Rd |
| ☐ Individual Storage Un | nit #124 | | , | | |
| 2. Address of Property Acquired | d by Willia | mson Coun | ty: | 3. Address Moved To: | 6 6 |
| 4700 Sam Bass Road | | | | Spriewood | Super Storage |
| Round Rock, Texas 78681 | | | | 9514 HW | (71' |
| Claimant's Telephone No.: 5.2 000 1955 | | | | COMMITTEE | 1 TX 7 X10(09) |
| Email S COM | | | -COW | - Ancewood | C 170 34 2 7 |
| 4. Occupancy of Property Acqu | ired by Wi | lliamson Co | uintv. | 5. Distance Moved: Miles | = Duiles |
| From (Date) | | of Moye): | 1 . | 7. Mover's Name and Address: | 30111111 |
| Owner/Occupa | nt M | 9/30 Tenant | 12021 | Self-Move based off approved fee schedule VEHICLE/AUTO | |
| 6. Controlling Dates | Mo. | Day | Yr. | | |
| a. First Offer in Negotiation | 05 | 11 | 2020 | 9. Amount of Claim: | |
| b. Date Property Acquired | 05 | 29 | 2021 | | |
| c. Date Required to Move | 11 | 30 | 2021 | Moving Expenses | \$250.00 |
| 8. Property Storage (attach expl | | | | | \$250.00 |
| From (Date): N/A To (Date of | of Move): N | I/A | | Total Amount | \$250.00 |
| Place Stored (Name and Addres | ss): | | | | |
| N/A | | | | | |
| | | | | | |
| 10. Temporary Lodging (attach From (Date): N/A To (Date of | | | | | |
| | | E | able and ar | e supported by attached receipts. Pay of this | s claim is requested. I certify that I have |
| not submitted any other claim for, o | r received re | imbursement | for, an iten | n of expense in this claim, and that I will no n. I further certify that all property was mov | ot accept reimbursement or compensation |
| Block 3, above, in accordance with | the invoices | submitted an | d agreed te | rms of the move and that all information su | bmitted herewith or included herein is |
| true and correct. | 11 | 10- | | | |
| man | 1/1 | 100 | re | _ | 1 |
| Signature Claimant Date of Claim: | | | | | |
| moren 8 WIL | | | | | |
| 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 | | | | | |
| | | | | on attached herewith and have found it to be ary reasonable expenses and this claim is re | |
| Amount of \$ 250.00 | | | | 1 DA | |
| 3-11-2022 | | | | | |
| Date Relocation Agent | | | | | |
| | | | | | |
| | | | | | |
| 0 10 24 | | | | | |
| Bill Gravell (Mar 24, 2022 14:16 CDT) | | | | | |
| Date | | | | Williamson County | y Judge |

| Parcel 13 Sam Bass Road | | Displacee Name _ | Stephany Moore | |
|--------------------------------------|---------------|------------------|----------------|--|
| Tenant Personal Property | | | 107 | |
| Relocation Estimate | | Unit Number | 107 | |
| Type of Property | Buehler | Comments: | | |
| | cost per each | | 5 | |
| Passenger Vehicles | \$250.00 | <u> </u> | | |
| Covered Trailers | \$250.00 | | m | |
| Flatbed Trailers | \$250.00 | | | |
| Various Boats with Trailers | \$300.00 | | | |
| Motorhome Bus | \$500.00 | | | |
| Motorhome | \$400.00 | | | |
| Box Truck | \$450.00 | | | |
| Food Truck | \$450.00 | | | |
| Travel Trailers All Sizes | \$400.00 | | | |
| 8' X 8' Storage Bins (contents only) | \$850.00 | | | |
| Slide in Truck Camper | \$350.00 | | | |
| Office Trailer | \$650.00 | | | |

CERTIFICATION OF ELIGIBILITY

| Project Sam Bass Road | |
|---|---|
| Parcel: 13 | |
| Tenant Name: Stephany Muz | ORE |
| Unit/Space #: 24 | |
| Individuals, Families and Unincorporate | d Businesses or Farming Operations |
| | a 2 delices of 1 drining Operations |
| I certify that myself and any other party(ies) with a fina are either: | ancial interest in this relocation assistance claim |
| Citizens or Nationals | of the United States |
| Aliens lawfully presen | nt in the United States |
| *If an Alien lawfully present in the United States, supp | porting documentation will be required. |
| aman Moor | Date: 09/30/207 |
| | |
| | Date: |
| Signature | |
| | |
| Incorporated Business, Farm or | r Nonprofit Organizations |
| | |
| I certify that I have signature authority for this entity an applicable state's laws and authorized to conduct busine | nd such entity is lawfully incorporated under the ess within the United States. |
| N/A | |
| | Date: |
| Claimant | |

PLEASE COMPLETE, SIGN, DATE AND RETURN

Contact Notes

Project Corridor H/Sam Bass Road Parcel 13

| Unit <u>#</u> | 124 |
|---------------|----------------|
| Name | Stephany Moore |
| Phone | 5 |
| il | m |

| Date | Comments |
|------------|--|
| 07-23-2021 | Letter notifying of project and move date and relocation eligibility. |
| 11-04-2021 | Move Verified |
| 03-02-2022 | Email stating, they have 18 months to file a claim |
| 03-02-2022 | Received email from Stephany Moore asking about move benefits, I explained the project and relocation benefits for moving her vehicle. I told her I would prepare claim forms and send to her. |
| 03-07-2022 | Prepared claim documents and sent to Ms. Moore for signature. |
| 03-08-2022 | Signed claim documents return from Stephany Moore |
| 03-11-2022 | Prepared move claim package and sent to Sheets and Crossfield for approval and payment. |
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