

Household Moving Allowance State of South Dakota

RECEIVED

FEB 16 2018

When Application and Authorization sections are completed, please submit the original to:

State Board of Finance
Office of Secretary of State
500 E Capitol Ave
Pierre SD 57501 Phone: 605-773-3537

Please check one:

- State Transfer (SDCL 3-9-9)
Full-time continuous employment for 6 months.
- Professional Recruitment (SDCL 3-9-12)
Attach a written copy of the offer of employment and of payment of moving expenses.

S.D. SEC OF STATE

PLEASE NOTE: The Request and all supporting documentation must be received in the Office of the Secretary of State no later than **5:00 p.m. CT on the Thursday prior to the Board of Finance meeting.** Documentation received after that time will be processed at the next Board of Finance meeting. All documentation **MUST** comply with Bureau of Human Resources policies regarding protection of personally identifiable information.

Application

Jacob Hasz	Conservation Officer	Game, Fish and Parks
Name of Applicant	New Position Title	Agency Employed By
40,000	Wall, SD	January 2018
Yearly Salary	City, State Moving From	Expected Month/Year of Move
90312	Rapid City, SD	8/2016
Bureau of Human Resources Class Code	New Post of Duty (City)	Employment Date with the State
	11/24/2017	8/2016

I hereby request authorization and approval to submit a voucher for reimbursement of actual household moving expenses subject to the limitations established by South Dakota law. I shall attach to said voucher evidence of actual household moving expenses.

The IRS regulation for reporting moving expenses for employee states, "Employer reimbursement of an employee's moving expenses constitutes fringe benefits excludable from the employee's gross income if (1) the amounts would be deductible by the employee if they had directly paid or incurred these expenses, (2) the employee did not deduct the expenses in a prior year, and (3) if the move is 50 miles or more from the employee's former residence.

I certify that I have met the above listed criteria. I understand the reimbursement by the State of South Dakota for payment of the eligible moving expense will not be reported as taxable income to the IRS. While this reimbursement will not be reported as taxable, I acknowledge that ultimately I am responsible for the proper reporting of any tax liability of this reimbursement.

Signature of Applicant

11/20/17

Date

Authorization

The undersigned agent hereby certifies that the above individual is employed in a full-time position with the above agency, that the agency ordered the applicant to move as indicated, and that the move will be for the benefit of the State of South Dakota. The Agent further declares that, to the best of the Agent's knowledge and belief, the request and authorization for reimbursement of actual household moving expenses are true and correct.

Name of Authorized Agent

Signature of Authorized Agent

2/6/18
Date

Position/Title of Authorized Agent

Game, Fish & Parks

Agency of Authorized Agent

Approval by State Board of Finance

Approved by the State Board of Finance on _____
Date

Signature of Secretary, State Board of Finance

Note: When completed, retain one copy in employee personnel file and attach original to voucher to be sent to Auditor's Office.

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Application

<u>Jacob T. Manning</u> Name of Applicant	<u>Park Manager</u> New Position Title	<u>Game, Fish & Parks</u> Agency Employed By	
<u>36,000</u> Yearly Salary	<u>Lemmon, SD</u> City, State Moving From	<u>Yankton, SD</u> New Post of Duty (City)	<u>11/6/2017</u> Expected Month/Year of Move
<u>90521</u> Bureau of Human Resources Class Code		<u>06/09/2016</u> Employment Date with the State	

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[Signature]
Signature of Applicant

12-7-17
Date

Authorization

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Kelly R. Hepler
Name of Authorized Agent

Cabinet Secretary
Position/ Title of Authorized Agent

[Signature] 11/17/18
Signature of Authorized Agent Date

Game, Fish & Parks
Agency of Authorized Agent

Approval by State Board of Finance

Approved by the State Board of Finance on _____
Date

Signature of Secretary, State Board of Finance

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Application

Blake Swanson	Grant County	SD GFP
Name of Applicant	New Position Title	Agency Employed By
\$44262.40	Conservation officer	Dec 2017
Yearly Salary	New Post of Duty (City)	Expected Month/Year of Move
GI	Milbank, SD	
Bureau of Human Resources Class Code	Employment Date with the State	
	May 2014	
	City, State Moving From	

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	1/15/2018
Signature of Applicant	Date

Authorization

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Kelly R. Hepler	Cabinet Secretary
Name of Authorized Agent	Position/ Title of Authorized Agent
	Game, Fish & Parks
Signature of Authorized Agent	Agency of Authorized Agent

Approval by State Board of Finance

Approved by the State Board of Finance on	Signature of Secretary, State Board of Finance
Date	

Household Moving Allowance
State of South Dakota

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FEB 05 2018

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S.D. SEC. OF STATE

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Application

Michael Ondlin
Name of Applicant

Conservation Officer SD Game, Fish & Parks
New Position Title Agency Employed By

\$18.44/hr.
Yearly Salary

Onida, SD
City, State Moving From

Webster, SD
New Post of Duty (City)

November, 2017
Expected Month/Year of Move

GI
Bureau of Human Resources Class Code

November, 2015
Employment Date with the State

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Michael Ondlin
Signature of Applicant

12/17/17
Date

Authorization

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Kelly R. Hepler
Name of Authorized Agent

Cabinet Secretary
Position/ Title of Authorized Agent

[Signature]
Signature of Authorized Agent

Game, Fish & Parks
Agency of Authorized Agent

Approval by State Board of Finance

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Date

Signature of Secretary, State Board of Finance

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Application

Stuart Griffith

Name of Applicant

Headquarters Specialist

New Position Title

SD Highway Patrol

Agency Employed By

\$49,067.20

Vermillion SD

Rapid City SD

April 2018

Yearly Salary

City, State Moving From

New Post of Duty (City)

Expected Month/Year of Move

666674

06/02/14

Bureau of Human Resources Class Code

Employment Date with the State

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Signature of Applicant


1-8-18
Date

Authorization

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Angela Lemieux
Name of Authorized Agent

Director of Admin & Grant Oversight
Position/ Title of Authorized Agent

 1/12/18
Signature of Authorized Agent Date

Department of Public Safety
Agency of Authorized Agent

Approval by State Board of Finance

Approved by the State Board of Finance on

Date

Signature of Secretary, State Board of Finance

**Household Moving Allowance
State of South Dakota**

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FEB 06 2018

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Application

<u>Rasmus Houborg</u>	<u>Sr Research Scientist</u>	<u>South Dakota State University</u>
Name of Applicant	New Position Title	Agency Employed By
<u>\$98,160</u>	<u>Melby, DK</u>	<u>December 2017</u>
Yearly Salary	City, State Moving From	Expected Month/Year of Move
<u>00502</u>	<u>Brookings, SD</u>	<u>1/8/2018</u>
Bureau of Human Resources Class Code	New Post of Duty (City)	Employment Date with the State

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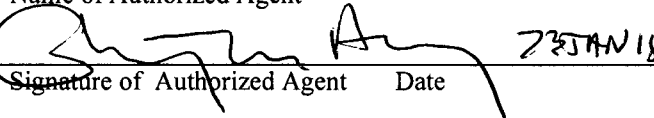
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Signature of Applicant

JAN 23, 2018
Date

Authorization

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Geoffrey M. Henebry
Name of Authorized Agent

Signature of Authorized Agent Date

Co-Director, GSCE
Position/ Title of Authorized Agent
South Dakota State University
Agency of Authorized Agent

Approval by State Board of Finance

Approved by the State Board of Finance on _____
Date

Signature of Secretary, State Board of Finance

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Professional Recruitment (SDCL 3-9-12)
 Pierre SD 57501 Phone: 605-773-3537 moving

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Application

<u>Jerrell Kelly</u> Name of Applicant	<u>Intramural Coordinator</u> New Position Title	<u>SDSU</u> Agency Employed By
<u>\$37000</u> Yearly Salary	<u>Bluffton, SC</u> City, State Moving From	<u>Brookings</u> New Post of Duty (City)
<u>00361</u> Bureau of Human Resources Class Code	<u>01/08/2018</u> Employment Date with the State	<u>01/2018</u> Expected Month/Year of Move

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Jerrell Kelly
Signature of Applicant

01/23/2018
Date

Authorization

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Shari Landmark
Name of Authorized Agent

Director
Position/ Title of Authorized Agent

[Signature]
Signature of Authorized Agent Date

SDSU
Agency of Authorized Agent

Approval by State Board of Finance

Approved by the State
Board of Finance on

_____ Date

_____ Signature of Secretary, State Board of Finance

Household Moving Allowance State of South Dakota

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Application

<u>John Killefer</u> Name of Applicant	<u>Dean, College of Agriculture & Biological Sciences</u> New Position Title	<u>SDSU</u> Agency Employed By
<u>\$240,000</u> Yearly Salary	<u>Corvallis, OR</u> City, State Moving From	<u>Brookings, SD</u> New Post of Duty (City)
<u>00182</u> Bureau of Human Resources Class Code	<u>March 2018</u> Employment Date with the State	<u>March, 2018</u> Expected Month/Year of Move

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[Signature]
Signature of Applicant

12-11-2017
Date

Authorization

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Dennis Hedge
Name of Authorized Agent

Provost / VP Academic Affairs
Position/ Title of Authorized Agent

[Signature] 12-20-2017
Signature of Authorized Agent Date

SDSU
Agency of Authorized Agent

Approval by State Board of Finance

Approved by the State Board of Finance on

_____ Date

_____ Signature of Secretary, State Board of Finance

Household Moving Allowance State of South Dakota

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Application

Kwanghee Won

Name of Applicant

Instructor, Computer Science

New Position Title

SDSU

Agency Employed By

80,364

Yearly Salary

Lincoln, Nebraska

City, State Moving From

Brookings

New Post of Duty (City)

February, 2019

Expected Month/Year of Move

00900

Bureau of Human Resources Class Code

January 3, 2018

Employment Date with the State

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Kwanghee Won
Signature of Applicant

1/11/18
Date

Authorization

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Steve Hietpas

Name of Authorized Agent

EECS Department Head

Position/ Title of Authorized Agent

[Signature]
Signature of Authorized Agent

1/11/2018

Date

SDSU-College of Engineering

Agency of Authorized Agent

Approval by State Board of Finance

Approved by the State
Board of Finance on

Date

Signature of Secretary, State Board of Finance

Household Moving Allowance
State of South Dakota

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Application

<u>Yue Zhou</u> Name of Applicant	<u>Assistant professor</u> New Position Title	<u>SDSU - EECS</u> Agency Employed By
<u>87,721</u> Yearly Salary	<u>Boston, MA</u> City, State Moving From	<u>12/2017</u> Expected Month/Year of Move
<u>00801</u> Bureau of Human Resources Class Code	<u>1/2/2018</u> Employment Date with the State	

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<u>[Signature]</u> Signature of Applicant	<u>1/22/2018</u> Date
--	--------------------------

Authorization

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<u>STEVEN HIETPAS</u> Name of Authorized Agent	<u>Professor/HEAD EECS Dept.</u> Position/ Title of Authorized Agent
<u>[Signature]</u> Signature of Authorized Agent	<u>SDSU</u> Agency of Authorized Agent
<u>1/23/18</u> Date	

Approval by State Board of Finance

Approved by the State Board of Finance on _____ Date	_____ Signature of Secretary, State Board of Finance
---	---

Household Moving Allowance
State of South Dakota

RECEIVED

JAN 29 2018

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500 E Capitol Ave
Pierre SD 57501 Phone: 605-773-3537

Please check one:

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Application

Dawn S. Bragg Name of Applicant Dean, Med Student Affairs New Position Title USD Agency Employed By

\$200,000 Yearly Salary Milwaukee, WI City, State Moving From Feb 2018 Expected Month/Year of Move

00142 Bureau of Human Resources Class Code

I hereby request authorization and approval to submit a voucher for reimbursement of actual household moving expenses subject to the limitations established by South Dakota law. I shall attach to said voucher evidence of actual household moving expenses.

The IRS regulation for reporting moving expenses for employee states, "Employer reimbursement of an employee's moving expenses constitutes fringe benefits excludable from the employee's gross income if (1) the amounts would be deductible by the employee if they had directly paid or incurred these expenses, (2) the employee did not deduct the expenses in a prior year, and (3) if the move is 50 miles or more from the employee's former residence.

I certify that I have met the above listed criteria. I understand the reimbursement by the State of South Dakota for payment of the eligible moving expense will not be reported as taxable income to the IRS. While this reimbursement will not be reported as taxable, I acknowledge that ultimately I am responsible for the proper reporting of any tax liability of this reimbursement.

Dawn Bragg Signature of Applicant 12/27/2017 Date

Authorization

The undersigned agent hereby certifies that the above agency ordered the applicant to move as indicated and that the move will be for the benefit of the State of South Dakota. The Agent further declares that to the best of my knowledge and belief the request and authorization for reimbursement of actual household moving expenses are true and correct.

Sheila Gestring Name of Authorized Agent Vice President, Finance Position/ Title of Authorized Agent
Sheila Gestring Signature of Authorized Agent 1-25-18 Date University of South Dakota Agency of Authorized Agent

Approval by State Board of Finance

Approved by the
State Board of
Finance on

Date

Signature of Secretary, State Board of Finance

Note: When completed, retain one copy in employee personnel file and attach original to voucher to be sent to Auditor's Office.

Household Moving Allowance State of South Dakota

RECEIVED

JAN 29 2018

S.D. SEC. OF STATE

When Application and Authorization sections are completed, please submit the original to:

State Board of Finance
Office of Secretary of State
500 E Capitol Ave
Pierre SD 57501 Phone: 605-773-3537

Please check one:

- State Transfer (SDCL 3-9-9)
Full-time continuous employment for 6 months.
- Professional Recruitment (SDCL 3-9-12) Attach a written copy of the offer of employment and of payment of moving expenses.

PLEASE NOTE: The request and all supporting documentation must be received in the Office of the Secretary of State no later than 5:00 p.m. CT eight days prior to the Board of Finance meeting on the third Tuesday of the month. Documentation received after that time will be processed at the next Board of Finance meeting. All documentation MUST comply with Bureau of Human Resources policies regarding protection of personally identifiable information.

Application

Steven Chesnut

Assistant Professor

Univ. of S.D.

Name of Applicant

New Position Title

Agency Employed By

\$57,500

Petal, MS

Vermillion, SD

Summer, 2018

Yearly Salary

City, State Moving From

New Post of Duty (City)

Expected Month/Year of Move

08000

August 22, 2018

Bureau of Human Resources Class Code

Employment Date with the State

I hereby request authorization and approval to submit a voucher for reimbursement of actual household moving expenses subject to the limitations established by South Dakota law. I shall attach to said voucher evidence of actual household moving expenses. The IRS regulation for reporting moving expenses for employee states, "Employer reimbursement of an employee's moving expenses constitutes fringe benefits excludable from the employee's gross income if (1) the amounts would be deductible by the employee if they had directly paid or incurred these expenses, (2) the employee did not deduct the expenses in a prior year, and (3) if the move is 50 miles or more from the employee's former residence. I certify that I have met the above listed criteria. I understand the reimbursement by the State of South Dakota for payment of the eligible moving expense will not be reported as taxable income to the IRS. While this reimbursement will not be reported as taxable, I acknowledge that ultimately I am responsible for the proper reporting of any tax liability of this reimbursement.

Steven R Chesnut

Dec 29, 2017

Signature of Applicant

Date

Authorization

The undersigned agent hereby certifies that the above individual is employed in a full-time position with the above agency, that the agency ordered the applicant to move as indicated, and that the move will be for the benefit of the State of South Dakota. The Agent further declares that, to the best of the Agent's knowledge and belief, the request and authorization for reimbursement of actual household moving expenses are true and correct.

Sheila Gestrung

Vice President, Finance

Name of Authorized Agent

Position/ Title of Authorized Agent

Sheila Gestrung 1-25-18

Signature of Authorized Agent Date

The University of South Dakota

Agency of Authorized Agent

Approval by State Board of Finance

Signature of Secretary, State Board of Finance

Note: When completed, retain one copy in employee personnel file and attach original to voucher to be sent to Auditor's Office.