**United States Department of Agriculture** Marketing and Regulatory Programs **Animal And Plant Inspection Service** 

## STATEMENT OF UNDERSTANDING **WAIVER OF PAYMENT OF** TRANSPORTATION, TRAVEL, AND **RELOCATION EXPENSES**

	a position in another (commuting area/or describe the making this request primarily for my personal conver	
2.	I have been advised that such request would make me ineligible for payment of travel and transportation expenses and applicable allowances as provided by regulation, 41 CFR. 301, 302.	
3.	I understand that, if selected, I will be responsible for <u>all</u> travel, transportation, and relocation expenses incurred and associated with reporting for duty to the new (commuting area/or describe the particular position).	
PRINT NAME:		
SIGNA	TURE:	DATE
PHIS Form 349		

1. I, \_\_\_\_\_, voluntarily request consideration for assignment to