

Relocation Repayment Agreement

I, _____, acknowledge that as a condition of my employment and/or career development, I am being relocated (together with my family and household effects) at the expense of the Institute.

I further acknowledge a report of direct expenses incurred as a result of this relocation will be reported to the appropriate Federal and State tax agencies by the Institute and reflected on my earnings statements. I fully understand that I must declare such income for the tax year during which the expenses are incurred.

I further acknowledge should I voluntarily terminate my employment with the Institute prior to twelve months from the date of relocation, it is agreed I will reimburse the Institute for any and all expenses paid to me, or on my behalf, related to my relocation, including any tax liability paid by the Institute, per the following table:

Relocation Repayment	
Months Since Relocation	% of Relocation Expense to be Reimbursed to Company
0 - 4 Months	100%
5 - 7 Months	60%
8 - 9 Months	40%
10 - 11 Months	20%
12 or more Months	0%

Finally, I authorize the Institute to withhold the maximum amount permitted by law, payment of any and all monies due me in the nature of wages, reimbursable business expenses, and may use all other available means to satisfy this obligation. I agree that any remaining balance shall become immediately due and payable without notice or demand. I also agree that I will be responsible to pay any legal expenses associated with the collection of this debt.

Relocation Information	
If you are moving to a different state of residence, please provide the following information:	
State or Country moving FROM :	
State or Country moving TO :	

Signatures		
Employee Print Name	Employee Signature	Date
Approver - Manager Print Name	Approver - Manager Signature	Date