



# **Eligibility for Partial DLA**

- ▶ Effective 27 April 2022, a Service member ordered to occupy or vacate Government quarters due to privatization, renovation, or any other reason for the Government's convenience must be paid a partial DLA
- Partial DLA is not authorized for a local move upon separation or retirement, from privatized housing to privatized housing, or for any of the following reasons:
  - ✓ A PCS
  - ✓ A change in family size or bedroom requirements for the Service member's convenience, including promotion
  - ✓ A Service member voluntarily decides to move
  - ✓ Pending divorce or family separation
  - ✓ Service member misconduct
  - ✓ A move between unaccompanied housing units
- Partial DLA is a one-time payment paid at a flat rate for a qualifying event. See JTR, par. 050508
  - ✓ Partial DLA rate for 2022 is \$840.07.





- Complete a DD Form1351-2 (example attached)
- Sign into DFAS website at <a href="https://www.dfas.mil/">https://www.dfas.mil/</a>
- Click on Member Pay
- Click on Travel Pay drop down arrow
- Click on Where to Submit Claim
- Scroll down and select Travel Voucher Direct
- Click on the Consent banner
- Click Travel voucher Direct to open "subcategories"
- Select Military PCS





# Partial DLA instructions cont.

- Enter personal information
- Attach a completed DD Form 1351-2. Ensure to complete blocks 20a & 20b, Soldiers Signature/Date, block 20c, Reviewers Name/Signature(First Line Supervisor may sign). Ensure block 20b & 20f are dated after the issue date of the CNA
- Attach the Temporary CNA-Certificate of Non-Availability MFR (Example attached)
- Attach the signed FC Form 1247 (Certificate of Non-Availability of Government Quarters and Exception to Policy (Example attached)
- Upload above documentation
- Submit voucher









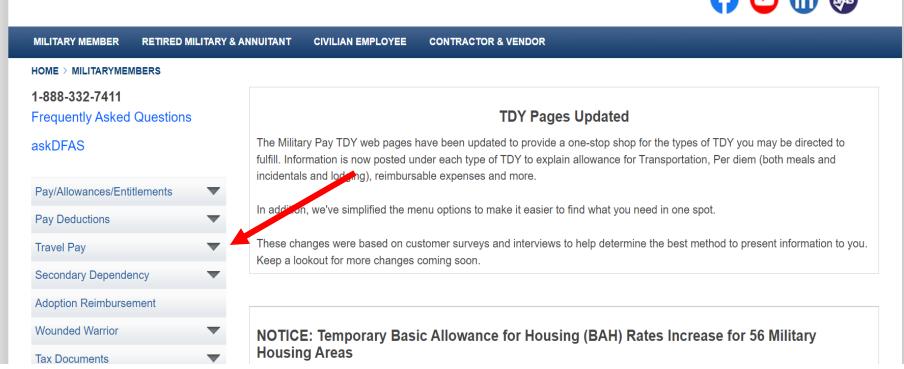




Search Defense Finance

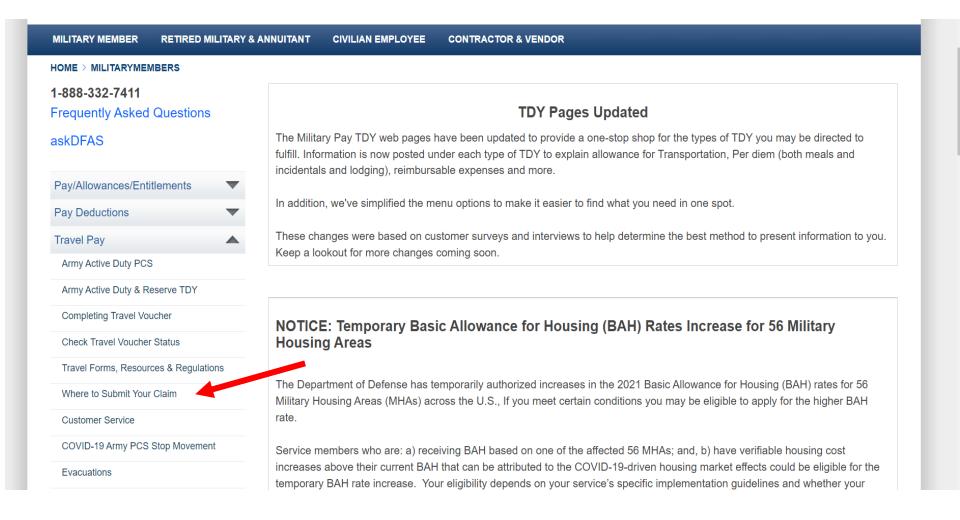
MyPay

ASSA













- · Retirement/Separation Vouchers
- Temporary Lodging Expense Vouchers
- Dislocation Allowance Requests
- Personally Procured Moves (PPM)/Do It Yourself (DITY) As an attachment only for submission

Not for those using DTS (Defense Travel System) for their travel vouchers.



Note: Do not use Travel Voucher Direct to submit your SmartVoucher claim, it is a different system. Upload your travel voucher and supporting documents online! Travel Voucher Direct is available for all travel claims computed and paid by DFAS.

The following are supported/accepted document types for travel voucher submissions:

- PDF (.pdf)
- Microsoft Word (.doc / .docx)
- JPEG Image (.jpg / .jpeg)
- TIFF Image (.tif / .tiff)
- Lotus Forms (.fdl / .xfdl)
- Excel (.xls / .xlsx)
- PowerPoint (.ppt / .pptx)
- Rich Text (.rtf)
- PNG Image (.png)
- Text (.txt)

You may upload up to three (3) files no larger than 5MB each.

Note: Not for those using DTS (Defense Travel System) for their travel vouchers.



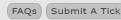




#### Defense

Providing 1-888-332

### TRAVEL VOUCHER



Step 1: Select a Cate





#### DoD Consent

#### You are entering an Official U.S. Government System

#### By using this Information system consent to the following conditions:

- The USG routinely intercepts and monitors communications on this IS for purposes including, but not limited to, penetration testing, COMSEC monitoring, network operations and defense, personal misconduct (PM), law enforcement (LE), and counterintelligence (CI) investigations.
- . At any time, the USG may inspect and seize data stored on this IS.
- Communications using, or data stored on, this IS are not private, are subject to routine monitoring, interception, and search, and may be disclosed or used for any USG-authorized purpose.
- This IS includes security measures (e.g., authentication and access controls) to protect USG interestsnot for your personal benefit or privacy.
- Notwithstanding the above, using this IS does not constitute consent to PM, LE or CI investigative
  searching or monitoring of the content of privileged communications, or work product, related to
  personal representation or services by attorneys, psychotherapists, or clergy, and their assistants. Such
  communications and work product are private and confidential. See <u>User Agreement</u> and <u>User Rules of
  Behavior</u> for details.

#### **Privacy Act Statement:**

### The Information accessed through this system is for OFFICIAL USE ONLY and must be protected in accordance with the PRIVACY ACT OF 1974.

- The Privacy Act of 1974 covers the information you provide to AskDFAS. To receive a copy of the Privacy Act Statement for the actions you enter into the system, please see your supervisor.
- Authority: Title 5 U.S.C. Chapters 53, 55, 81; Title 10 U.S.C. Chapters 11, 61-73; Title 37 U.S.C.; GAO Manual for Guidance of Federal Agencies, Title 6, Chapter 4, para. 4.2.B.2; and E.O. 9397
- Purpose of Use: Data provided could be used for validating the trustworthiness of an individual's
  request for access to AskDFAS. The AskDFAS system may collect PII and the information may be shared
  with specified agency employees such as accountants, technicians, customer service representatives, or
  operations personnel with a need-to-know. These employees may respond to inquiries submitted via the
  AskDFAS system. The following information types could be collected: employee name, SSN, work
  organization, work location, work email, work phone, personal home/mobile phone number, birth date,
  marital status.
- Routine Uses: Those generally permitted under the 5 U.S.C. 522A(B) of the Privacy Act as required.
- · Disclosure: Disclosure is voluntary.

### Section 508 Compliance Statement

In accordance with Section 508 of the Rehabilitation Act of 1973, as amended, (29 U.S.C. 794d), DFAS is committed to ensuring that AskDFAS functionality and content is accessible to all customers. Send feedback or concerns related to the accessibility of this website to the DFAS 508 coordinator at: dfas.indianapolis-in.zta.mbx.section508@mail.mil. For more information about Section 508, please visit the DoD Chief Information Officer (CIO) Section 508 Website available at https://dodcio.defense.gov/DoDSection508.aspx

I consent to the above for system access













### **Defense Finance and Accounting Service**

Providing payment services of the U.S. Department of Defense 1-888-332-7411





### TRAVEL VOUCHER DIRECT -- ONLINE CUSTOMER SERVICE

FAQs Submit A Ticket





Step 1: Select a Category by clicking the >> button next to the category name.



**Subcategories** 

**Travel Voucher Direct** 

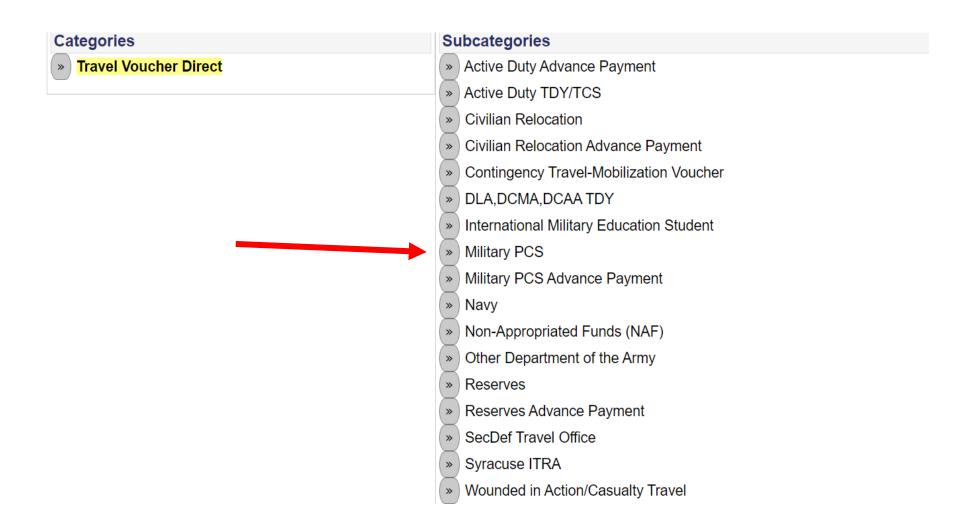


AskDFAS Welcome Center www.dfas.mil FOIA and Privacy Act Legislative Affairs

**Blue Book** Web Policies USA.gov Defense Sector CIP EEO/No Fear Act Accessibility/Section 508











'AS/ticketInput.action?currentUser.currentRequestNonce=c4d4075a-e704-4a8d-b0af-dbc3fcf1551d&pgModId=5080 Note: The viewed and rating columns will not be updated until you return to the home page or refresh this page. Your Information Change Category/Sub-Category selection Travel Voucher Direct Category: Subcategory: Military PCS Name: First\*: Middle: Last\* To ensure spam blocker does not block receipt of responses regarding your ticket, please add DFAS-TRAVELPAY-CCC@mail.mil to your safe senders' email list before submitting your ticket. Email\*: Re-enter Email\* Additional Email: If you would like this information and responses sent to additional email addresses, enter them here. Separate multiple addresses with the semi-colon (:) Passcode\* Create a passcode for this ticket to view information and responses. Passcodes must be a minimum of 15 characters and contain at least one lowercase letter, one uppercase letter, one number, and one special character. Passcodes cannot contain your name or email address. Safeguard your passcode for future use Entering additional email address(es) above will be only be used for the first receipt notification email. After that stage in the process, the system will send notifications to just one email address, the main email address you provided above ? Attachment Section ast 1 file must be uploaded. Choose File | No file chosen Choose File | No file chosen Choose File No file chosen Choose File No file chosen Choose File No file chosen Attach your documentation and receipts to your voucher by clicking the Upload Files button before pressing the submit Upload button to make sure they get included. Attachments Submit your voucher and attachments for processing Submit Cancels your submission and returns you back to the FAQ Page. O Cancel PRIVACY ACT STATEMENT: Disclosure of your contact and other information is voluntary. It is solicited for the sole purpose of responding to your inquiry or request. If it not provided, we may not be able to respond.

- Complete personal information
- Attached documents
  - ✓ DD Form 1351-2
  - ✓ Certificate of Nonavailability of Government Quarters and Exception to Policy
  - Temporary Certificate of Nonavailability to Reside Off-Post
- Upload attachments
- Submit Claim



EEO/No Fear Act



# U.S. Army Financial Management Command





TRAVEL VOUCHER OR SUBVOUCHER   form.							Use	typew	riter,	ink,	or ball point p	en. PRES	SS HARD	. DO NOT u	se pen	cil. If more space	
<b>V</b>	ting travel charges for transportation, lodgin designate a payment that equals the total of				on, lodging, ar ne total of the	is needed, continue in remarks.  Office will pay directly to the Government Travel Charge Card (GTCC) contractor the portion of your reimbursement represeng, and rental car if you are a civilian employee, unless you elect a different amount. Military personnel are required to of their outstanding government travel card balance to the GTCC contractor.  If y necessary when a GTCC is used while on official travel for the Government.											
		in the second se							irectly to the Government Travel Charge Card contractor:								
2. NAME (Last, First, Middle Initial) (Print or type)  3. GRAI						DE) 4. SSN)					OF PAYMENT	· · · · · · · · · · · · · · · · · · ·	,				
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ACCOMPANIED UNACCOMPANIED						ORDERS (Include Zip Code)											
a.	NAME (La	ast, First, Mi	ddle Initial)	b. RELATI	b. RELATIONSHIP C. DATE OF OR MARI			1									
							14. HAVE HOUSEHOLD GOODS BEEN SHIPPED (X one)						d. COMPUTATIONS				
								YES NO (Explain in Remarks)					Remarks)				
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		ABLE EXPE	NSES							(5) DLA							
a. D	ATE	b. NATURE OF EXPENSE				c. AMO	d. ALLOWE		ED		12 HOURS OR LESS		(6) Reimbursable Expenses				
		PARTIAL DLA				8-					MODE THAN 12	HOLIDS	(7) Total				
												MORE THAN 12 HOURS BUT 24 HOURS OR LESS MORE THAN 24 HOURS		(8) Less Advance			
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20 <mark>.a. C</mark>	LAIMAN <sup>*</sup>	T SIGNATU	RE														(b. DATE)
c. REVIEWER'S PRINTED NAME					GNATURE						e. TELEPHONE NUMBER f. DATE			f. DATE			
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### CERTIFICATE OF NONAVAILABILITY OF GOVERNMENT QUARTERS AND EXCEPTION TO POLICY

(For use of this form see AR 420-1. The proponent of this form is DPW.)

### PRIVACY ACT STATEMENT

AUTHORITY: Title 5, U.S.C. 3012.

PRINCIPAL PURPOSE: Used to gather information to substantiate a request for quarters allowance.

ROUTINE USES: Used to authorize payment of basic allowance for quarters at the "without dependent" rate.

DISCLOSURE: Voluntary. Failure to provide information could result in the denial of the request for payment of

basic allowance for quarters at the "without dependent" rate.

Pursuant to authority delegated to me by the Fort Campbell, Kentucky Garrison Commander, I verify that government quarters were not available for:							
(RANK)	(NAME)						
from (ORGA	to						
The above named individual Is Authorized basic allowance for quarters at the "without dependent" rate							
during the dates indicated above in accordance with Art	during the dates indicated above in accordance with AR 420-1, paragraph 3-20k (2.b).						
	Mark F. Herndon Chief, UPH/ABMP						
Garrison Ex	ception to Policy						
The above named individual Is Authorized and is Approved to receive basic allowance for quarters at the "without dependent" rate during the dates indicated above in accordance with AR 420-1, paragraph 3-20k(a).							
Be advised that on-post housing (barracks) may be available to you within 12 months. If this occurs you will be required to accept government housing (barracks) at the expiration of your certificate of non-availability (CNA) or exception to policy (ETP) period. Your off-post living arrangements should be made based on this information. You must contact your unit barracks assignment office <u>at least 60 days prior to the expiration of your CNA/ETP</u> to facilitate barracks assignment arrangements. Also, in the event of deployment, this CNA/ETP will terminate on the last day of the deployment departure month or date specified above, whichever comes first.							
	ANDREW Q. JORDAN						
	COL, SF Commanding						



# FORT CAMPBELL

ABMP (Army Barracks Management Program) Building 2702, Michigan Ave

> Fort Campbell, KY 42223 270-798-9446

ARM	RMY BARRACKS MANAGEMENT PR						
	ONUNATIVE MAN	CNA Control#:					
		Date: Aug-27-2022					
ME	MEMORANDUM FOR: SEE DISTRIBUTION						
SU	SUBJECT: Temporary Certificate of Non-Availability (CNA) to Re	eside Off-Post					
	5						
4	1 This						
١,	<ol> <li>This memorandum certifies that On-Post Housing is not available.</li> <li>Name:</li> </ol>	ole for the following Service Member:					
	Rank: SGT Branch: Army Pay Grade: E5 UIC / Duty Station:						
2	2. Reference Chapter 3, AR 420-1.						
۷.	2. Reference Chapter 3, AR 420-1.						
	X The Service Member is authorized to move Off-Post and reco	eive Basic Allowance for Housing(BAH) or Overseas Housing					
	Allowance(OHA) at the WITHOUT Dependent Rate effective or through Aug-26-2023 , unless a change in status occurs before	Aug-27-2022 . This authorization to reside off-post is effective					
	year.	and date. The encours throught date will not exceed the					
3.	3. Prior to entering into any private rental agreement, the Service	Member must report to the Housing Office and provide the					
	Off-Post address, phone number, period of housing agreement	and any other change in status.					
4.	1. The Service Member must return to the Housing Office for assi	onment to available on-post quarters adequate for the Service					
	Member's grade 90 days prior to the expiration of the CNA on A	ug-26-2023 .					
5.	5. Notes: Garrison CDR approved ETP CNA for maturity and previous Ba	AH authorization.					
		ABIMP Fort Campbell, KY					
		Fort Campbell					
	a a	MARK HERNDON					
HO	OUSING VALIDATION REQUIRED	ABMP CHIEF					
		ORT CAMPBELL					
Ser	ervice Member's Signature:	Date: 29 Aug 2022					
DISTRIBUTION							
COMMANDER/1SG: 1 FILE: 1							
FIN	INANCE: 2 IDIVIDUAL: 1						
מאוו	NOTVIDOAL.	Printed: 08/26/2022 14:54:28					