${\it Per \ Diem \ 1996 \ Update: Appendix \ A-Page \ I}$ Per Diem Allowance Certification Form

Employee Name: A	ssignment Location:
Under Federal tax law a per diem allowance may only be excluded from withholding and employment taxation when two conditions are met: 1), the employee to whom the allowance is paid must maintain <i>either</i> a regular business location or a private residence; and 2), the employee must be traveling away from that place of business or residence <i>overnight</i> on a temporary work assignment.	
We therefore ask that you complete this form to help us determine whether you satisfy these requirements. Completing this form is entirely voluntary and your decision not to do so will not affect your eligibility for a work assignment. However, if you decide not to complete the form, or if you fail to include sufficient information for us to determine that you are eligible to receive a tax-deductible per diem payment, you will not be paid any per diem. Please complete Section A, B or C, whichever one is applicable to you.	
Section A By signing below I hereby certify that I have a regular place of business located at:	
Name of Business:	
Street Address:	
City, State, Zip:	
I have spent approximately months working at that location during t	he period immediately preceding this assignment.
I hereby certify that I intend to return to this place of business at the com	pletion of this assignment.
-or-	
Secti By signing below I hereby certify that I maintain a permanent residence	
Street Address:	
City, State, Zip:	
1. I have spent approximately months at this residence during the period immediately preceding the assignment. I herby certify that I intend to return to this residence at the completion of this assignment.	
2. I maintain the following business-related contacts in the vicinity of my residence:	
3. This assignment will require me to maintain a temporary residence that will duplicate my living expenses. 4. Check a or b, whichever is applicable.	
a. My immediate family will continue to reside at the permanent residence listed above while I am working on this assignment.	
	nanent residence listed above after my assignment is completed.
-or-	
Section C By signing below I hereby certify that I have neither a regular place of business nor a permanent residence.	
Initials	
I hereby certify that paragraph A B C (circle one) is applicable to my circumstances, that the foregoing is true, correct and complete, and agree to notify the Company immediately if my circumstances change during the course of my assignment.	
I further agree that, should I receive per diem payments in excess of the amount actually owed me because my assignment terminates earlier than expected, or for any reason whatsoever, I will notify the Employer and return any excess amounts.	
Employee's Signature:	Date:/
For Employer's Use Only:	

______ Date: ____/____

This assignment is expected to begin on __/_ /__ and to be completed within ____ months. In my opinion, this employee **is** / **is not** (circle one) eligible for per diem.

Reviewer's Signature:____