

PCS REPORTING WORKSHEET

1. Name (Last, First, MI)	2. Rate/Rank	3. Permanent Unit	4. EEMPLID
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PURPOSE: Use this form to indicate changes in mode of travel, TAD, and requested advances; changes in dependency, pay delivery, state or federal tax withholdings; updating allotments, ID cards, and to update your mailing address. If you have **any** questions, **TALK TO YOUR YEOMAN.**

5. Complete the following:	Date Completed
a. A (DD-Form-1172) to update the DEERS database (visit your nearest ID card facility) or call 1 (800) 538-9552 (except CA, AK or HI), 1 (800) 334-4162 (California) or 1 (800) 527-5602 (Alaska or Hawaii).	
b. Update and verify the information on your Direct Access BAH/Dependency Data form and Emergency Contact Information. Complete a new Designation of Beneficiaries/Record of Emergency Data (CG-2020D)	
c. Update personal contact information (e-mail, phone, address) in Direct Access.	
d. A Travel Claim for you and your dependents. Note: Submit both at the same time if you traveled before dependents	
e. A BAH/Housing Worksheet (CG-2025).	
f. If the PCS is applicable to a BAH or OHA rate protection provision, submit a Housing Allowance Protection Worksheet (CG -2025A) to Commandant (CG-1222).	
g. An Allotment Worksheet (CG-2040) and/or a Bond Worksheet (CG-2060) or use Direct-Access Self-Service to update allotment and bond addresses.	
h. Call the Government Travel Charge Card contractor (at the number on the back of the card) to update your mailing address	
i. Upon delivery of household goods shipment, complete the Customer Satisfaction Survey (CSS). For shipments in the Defense Personal Property System (DPS) go to www.move.mil . Click on DoD Customer, follow instructions in the CSS guide. For all others, go to www.fincen.uscg.mil/hhg.htm , click on SDDC Customer Satisfaction Survey.	

6. WHAT IS YOUR NEW MAILING ADDRESS, PHONE NUMBER AND EMAIL ADDRESS?
SPO will use this information to mailing address (*you can also use Direct-Access self-service to enter these changes*)

Address:		Apt/Lot #:	
City:	State:	Zip Code (+ 4):	
Home Number:	Work Phone:	Other Phone (cell, pager, etc. Indicate type and number):	
Primary (Business) Email Address:		Home/Internet Email Address:	

*This will NOT change your allotment or bond addresses, submit the appropriate worksheet or use Direct-Access to change.

7. Date Reported:	8. Time Reported:	9. Is this detached duty? Yes <input type="checkbox"/> No <input type="checkbox"/>
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Yes	No	10. Answer the questions below. Your response(s) will determine which action(s) the SPO will complete.
<input type="checkbox"/>	<input type="checkbox"/>	a. Did you travel as directed on your orders? (If no, explain the changes)
<input type="checkbox"/>	<input type="checkbox"/>	b. Did you go TAD/TDY in connection with this PCS transfer?
<input type="checkbox"/>	<input type="checkbox"/>	c. Do you want advances? (If yes, submit an Advances Worksheet)
<input type="checkbox"/>	<input type="checkbox"/>	d. Do you want to change where or how you receive your pay? (If yes, submit a Pay Delivery Worksheet or use Direct-Access to update.
<input type="checkbox"/>	<input type="checkbox"/>	e. Are the addresses for your allotments and bonds current? (If no, submit an Allotment or Bond Worksheet or use Direct-Access to update.
<input type="checkbox"/>	<input type="checkbox"/>	f. Are you changing your state or federal tax withholding or do you need to resume state tax collection due to residing in your legal state of residence? (If yes, contact your yeoman for specific state withholding procedures). You can change your federal and state tax withholdings in Direct-Access. However, only the SPO can enter your exemption from state taxes if you are eligible.
<input type="checkbox"/>	<input type="checkbox"/>	g. Have you had any change in dependency? (If yes, submit a Dependency Worksheet (CG-2020) and DD-Form-1172)
<input type="checkbox"/>	<input type="checkbox"/>	h. Do you want TRICARE Dental coverage for your dependents? (If yes, call 1 (888)622-2256 or visit http://www.ucci.com to enroll)
<input type="checkbox"/>	<input type="checkbox"/>	i. Did you participate in the last SWE?
<input type="checkbox"/>	<input type="checkbox"/>	j. Are your ID card and/or your dependent ID cards current?
<input type="checkbox"/>	<input type="checkbox"/>	k. Are you entitled to Family Separation-Housing (FSH)? Note: Based on an unaccompanied OCONUS tour, applicable only if you have received a memo from COMDT (CG-1222) authorizing BAH or OHA on the designated place of dependents, or if eligible, BAH on your previous duty station. Upon reporting, eligibility for FSH under the JFTR, U10414, will have to be determined by your command. FSH is not authorized if government quarters are available for assignment to you at your PDS. (Attn. SPO: Complete endorsement on reverse)

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10k SPO Endorsement

FSH: For PCS assignments where transportation of the member's dependent(s) is not authorized at Government expense to the station or to a place near the station and no Government quarters are available for assignment to the member. SPO should start BAH W/dependents using the zip code of the member's dependents (previous duty station or the designated place per CG-1222 authorization) and forward this FSA-H authorization to PPC (MAS), via fax to (785) 339-3760. PPC (MAS) will start the member's FSH entitlement.

Member departed from _____ on _____ (date). Member reported to _____ on _____ (date).
 Transportation of dependents is not authorized at government expense to this station or to a place near this station and no Government quarters are available for assignment to the member. Start FSH- O or FSH-B effective _____ (date. Starts when member's private sector housing is acquired but not prior to PCS report date.)

Common Problems

PCS Reporting/ Departing	Failure To.....	May Result In.....
	update allotment/bond address	nonreceipt of allotment/bond
	update DEERS information	<ul style="list-style-type: none"> denied payment of TriCare Claims delays in payment of TriCare Claims denied enrollment in Family Mbr. Dental Plan denied treatment MTFs
	enroll dependents in Family member Dental Plan	denied payment of FMDP claims
	update Pay Delivery Worksheet	pay not being delivered to intended place
	update Dependency Worksheet	underpayment/overpayment of BAH/COLA/OHA/DLA and travel
	report unknown payments or deduction(s) reflected on your LES	underpayment or overpayment
PCS Reporting	Failure To.....	Will Result In.....
	file member and or dependent travel claims	recoupment of all member and or dependent travel advances, including dislocation allowance (DLA). Note: If dependents are traveling separately and you received advance dependent travel or DLA, you should not file your travel claim until you dependents complete travel. Filing separate claims will result in recoupment of dependent related advances and DLA if your claim is processed first.
	submit BAH Worksheet	delay of entitlement to BAH rate at new Duty Station

Privacy Act Statement

In accordance with 5 USC Section 522a(e)(3), the following Information is provided to you when supplying personal information to the U. S. Coast Guard:

Authority - 37 USC Sections 403 & 404.

Principal Purpose(s) - Used to update member's records upon reporting to a new permanent duty station.

Routine uses - Same.

Disclosure - Disclosure of information is voluntary, but without disclosure the member may encounter problems with pay, taxes, dependent coverage and current identification cards.

Member's Signature	Date:	For SPO Use Only	
Command Approval	Date:	Action Completed Date: _____	Initials: _____