

LQA - Living Quarters Allowance Annual/Interim Expenditures Worksheet (DSSR 130)

Allowable expenses under the Living Quarters Allowance are reported here to process a claim on the SF-1190. This worksheet is reproducible locally.

1. Employee name (Last, First, Middle Initial)	2. Agency
3. Pay plan/Series/Grade/Annual salary	4. Date of arrival (mm/dd/yy)
5. Current post/Country of assignment/Locality code	

6. If spouse is employed by the U.S. Government:	
Spouse's Name:	Quarters Allowance Received:

7. Family domiciled at post					
Name of relative	Relationship	Dob except spouse (mm/dd/yy)	Percentage of support	Date of arrival at post	Residence address

8. Family domiciled away from post.					
Name of relative	Relationship	Dob except spouse (mm/dd/yy)	Percentage of support	Date of departure from post	Residence address

9. Description of quarters occupied by the employee	
Street address (include apartment or room number, if applicable)	Date quarters occupied (mm/dd/yy)
Quarters size: Total rooms (include dining room, living room, kitchen, bedrooms, den and bathrooms) _____ Total useable area _____ _____ square feet or _____ square meters	Type of quarters: <input type="checkbox"/> House <input type="checkbox"/> Furnished <input type="checkbox"/> Privately leased <input type="checkbox"/> Apartment <input type="checkbox"/> Unfurnished <input type="checkbox"/> Government owned or leased <input type="checkbox"/> Personally owned

10. If employee shares quarters, give name of person(s) with whom sharing and employing firm or agency	
Name (Last, First, Middle Initial)	Employing firm or agency

11. If employee rents quarters from another U. S. Government employee, give name of that employee and employing agency	
Name (Last, First, Middle Initial)	Employing agency

12. If employee lets or sublets portion(s) of his owned or leased quarters:	
(a) Name of sublessee (Last, First, Middle Initial)	Sublessee's employing firm or agency
(b) Amount received from sublessee	
(c) Has amount received from sublessee been deducted from expenses claimed under block 16? <input type="checkbox"/> Yes <input type="checkbox"/> No	
(d) Date let or sublet (mm/dd/yy)	