



**DEPARTMENT OF DEFENSE  
DEPENDENTS SCHOOLS  
OFFICE OF THE DIRECTOR, EUROPE  
UNIT 29649, BOX 7000  
APO AE 09096-7000**

**MEMORANDUM FOR DODEA TEMPORARY QUARTERS SUBSISTENCE  
ALLOWANCE RECIPIENT**

**SUBJECT: Conditions of Eligibility for Temporary Quarters Subsistence Allowance (TQSA)**

The authorization and payment of TQSA is governed by the provisions of Chapter 120 of the Department of State Standardized Regulations (DSSR) and DoD Manual 1400.25-M, Subchapter 1250. An employee must be eligible for living quarters allowance to be authorized TQSA.

TQSA is an allowance that is intended to assist in covering the average costs of adequate but not elaborate or unnecessarily expensive accommodations in a hotel, pension, or other transient-type quarters for you and your family members who are residing with you at your post of assignment. In addition, TQSA is intended to cover the cost of reasonable meal and laundry/dry cleaning expenses for a period not in excess of 90 days after first arrival at a new post in a foreign area or 30 days immediately preceding final departure from the post following vacating of residence quarters. TQSA is not intended to cover toiletry and sundry items, childcare products, smoking products, entertainment products, and alcoholic beverages. Therefore, the cost of these types of items may not be included on your claim for reimbursement.

The 90 and 30 day TQSA periods may be extended up to but not more than 60 days in each case if it is determined that compelling reasons beyond the control of the employee require continued occupancy of temporary quarters. You can request an extension of TQSA by letter or by email. When a request is received, the Program Manager for the Customer Operations Teams (COT) servicing your area will determine if circumstances warrant an extension. Once approved, the team member will fax or email a copy of the approval letter to you.

When you apply for TQSA, you will need to complete an SF-1190, Foreign Allowances Application, Grant and Report, a TQSA Worksheet, and a TQSA Actual Expense Worksheet. You will be required to attach copies of receipts for the lodging expenses you claimed on the worksheet with your TQSA submission. You may provide a certified statement as to your **actual daily costs** for meals and laundry/dry cleaning expenses. You can only claim actual expenses incurred versus a "flat" or "average" daily amount. Claims that do not include the actual daily expenses for lodging and meals will not be paid.

TQSA Claims must be filed online through the automated DoDEA Allowance Processing System (DAPS). You can receive assistance from your school secretary or your local Human Resources Office on the use of DAPS. Although receipts for meals, laundry, and dry cleaning expenses is not required to be submitted with your application for TQSA,

**you are required to retain receipts for all meal, laundry, and dry cleaning expenses.** If the amounts you have claimed appear to be extravagant, you will be required to provide receipts. If you fail to provide receipts, allowance payments for meals and laundry/dry cleaning expenses will be suspended until the supporting receipts are provided.

You are responsible for immediately reporting any changes that affect your TQSA authorization such as a change in marital or family status, change in the number of authorized dependents at the post, attainment of age 21 by a dependent child, or movement into permanent quarters. Immediate reporting of these changes will ensure you receive prompt payments, if due, or prevent you from incurring a debt. Intentional misrepresentation of the facts involving an application for TQSA may result in removal from Federal employment. If you have any questions about your TQSA, please contact your Local Human Resources Advisor or your servicing Customer Operations Team.

Please initial the bottom right hand corner of the first page and complete the section below. A signed copy of this memorandum must be faxed, back to the following number DSN 314-338-7122, or digitally scan it to Kevin Jones. Please retain a copy for your records.

I certify that have read and understand the above conditions regarding eligibility for a temporary quarters subsistence allowance.

Employee's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Employee's Name (printed): \_\_\_\_\_