Wagon Wheel Dining Facility
Phone: 8-6420
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GROUND SUPPORT BOX MEAL REQUEST

REQUIERS 2 HOURS
PREPARTION TIME

PICK UP TIME: PLEASE CORRDANATE WITH DFAC PERSONALS

DATE:		AIR CREW/NON AIR CREW
Squadron:	Section:	Phone #

Line #	GRADE	Name - Last and First Initial (print)	Print clearly below the items requested from today's menu
	DOD ID#		
	DOD ID#		
	DOD ID#		
	DOD ID#		
	DOD ID#		
	DOD ID#		
	DOD ID#		
	DOD ID#		
	DOD ID#		
	DOD ID#		
	DOD ID#		

I CERTIFY THAT THE ABOVE INDIVIDUALS ARE INVOLVED IN DUTY THAT PRECLUDES USE OF THE NORMAL DINING FACILITY DURING THIS MEAL PERIOD **(Signature required by SNCO)**

GRADE	ORGANIZATION	DUTY PHONE	SIGNATURE	Total Meals	Total Cash

AUTHORITY: 10 U.S.C., Chapter 40; 37 U.S.C., Chapter 9; EO 9397, November 1943
PRINCIPAL PURPOSES: Used to authorize and verify the Subsistence-in-Kind entitlement; record the numbers of people subsisting; and account for cash collected.
ROUTINE USES: Information may be disclosed to the Department of Justice, and to federal, state, local or foreign law enforcement authorities for investigating or prosecuting a violation or potential violation of law.
DISCLOSURE: Disclosure of SSN is voluntary. However, members otherwise entitled to Subsistence-in-Kind will not be provided a meal at no cost without the SSN, since the SSN is used to verify the entitlement.

"This document contains information which must be protected IAW AFI 33-332 and DOD Regulation 5400.11; Privacy Act of 1974 as Amended applies, and it is For Official Use Only (FOUO)."

*****NEW!!! DO NOT EMAIL DOD ID #s; PLEASE BRING THAT INFORMATION TO THE DFAC AT PICKUP.**