

SPECIAL MEAL REQUEST

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1. FROM: (ORGANIZATION/SECTION/UNIT)	2. DATE: (YYYY-MM-DD)
3. TO : FOOD SERVICE BRANCH	

4. POINT OF CONTACT: (NAME, RANK, TITLE, AND PHONE)

CHOW REQUEST:

5. PAY TYPE:	6. CONSUMPTION LOCATION:
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7. PERSONNEL BREAKDOWN	MEAL RATES		
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:35%; padding: 5px;">A.</td> <td style="padding: 5px;">B. TOTAL: (Discuss the total number of boxes needed)</td> </tr> </table>	A.	B. TOTAL: (Discuss the total number of boxes needed)	<p>THE MEAL RATE IS SET AS DIRECTED BY THE ANNUAL DoD FINANCIAL MANAGEMENT REGULATION. (DoD 7000.14-R)</p> <p>PLEASE VIEW CURRENT RATES LOCATED ON THE FOOD SERVICE WEBSITE OF REPECTIVE BASES.</p>
A.	B. TOTAL: (Discuss the total number of boxes needed)		

8. A. TYPE OF CHOW	B. MESS HALL	C. MEAL (B,L,D,BB,D.)	D. DATES	E. PICK UP TIME	F. PORTION

A ROSTER OF ALL PERSONNEL RECVING RATIONS IS REQUIRED PRIOR TO THE COMMENCEMENT OF THE OPERATION. PERSONNEL ROSTER OF PERSONS COLLECTING COMRATS WILL BE SUBMITTED TO S-1 FOR PAYROLL CHECKAGE.

9.	SIGNATURE & DATE
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ADDITIONAL COMMENTS

1. THIS REQUEST MUST BE SUBMITTED AT LEAST 10 DAYS PRIOR TO CONSUMPTION.
2. IF ANY CANCELATIONS OR MODIFICATIONS OCCUR DURING THE COORDINATION PROCESS, THE REQUESTING UNIT WILL MAKE ALL POSSIBLE ATTEMPTS TO ALERT FOOD SERVICE SEVENTY-TWO (72) HOURS PRIOR TO THE PICK-UP DATE.
3. REQUESTING UNITS ARE RESPONSIBLE FOR PAPER GEAR, EXCEPTION BEING HOT/COLD BEVERAGES.
4. ALL RIFLE RANGE REQUESTS REQUIRING SUBSISTENCE FOR FINAL DAY OF FIRING WILL BE SUPPORTED BY MEANS OF MEALS READY TO EAT (MRE'S).
5. SUPPORTING ORGANIZATION MUST BRING TO THE MESS HALL AT THE TIME OF PICK-UP ALL SUPPORTING DOCUMENTS TO INCLUDE THE REQUEST FORM AND PERSONNEL ROSTER.

BELOW THIS LINE, FOOD SERVICE USE ONLY

APPROVED	DISAPPROVED	10.	SIGNATURE & DATE
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INSTRUCTIONS FOR COMPLETING SPECIAL MEAL REQUEST FORM

1. DATE OF REQUEST. As stated.
2. FROM. Enter the DOD component office of primary responsibility, civilian agency, or JROTC establishment.
(i.e. Security battalion S-4)
3. TO. As stated
4. POINT OF CONTACT. First name, last name, rank/grade, job title, and functional daytime telephone number of the supervisor of the respective agency requesting support.
(i.e. GySgt John, Doe / Operations Chief / (xxx)-xxx-xxxx)
5. PAY TYPE. Select pay type for drop box.
 - DD form 714 (*Meal Cards*): Marine not receiving entitlement as subsistence in kind (SIK) (not receiving the pro-rate meal portion of per diem).
 - Pay Checkage (*Payroll Deduction*): Military members receiving full bas and not on per diem orders should have collections for meals deducted from their pay account when assigned to field or sea duty. Note: coordinate with administration section (i.e. S-1) to run payroll deduction via unit diary.
 - Military Interdepartmental Purchase Request (MIPR): funded reimbursable work estimate from DOD organization to organization. (*NAVCOMP form 2275*)
 - Other (*Cash, Check, Credit*): used for base tours, JROTC, and other civilian agencies.
6. CONSUMPTION LOCATION. Specify where aboard the military establishment will the support be consumed.
7. PERSONNEL BREAKDOWN.
 - A. Select from the drop box the classification (*Branch/Officer/Enlisted/etc.*), of patrons requesting support.
 - B. Select form the drop box the total number of patrons receiving support for each classification if multiple classifications are listed.
8. REQUESTING FORMAT. Apply the details of the messing support is being requested.
 - A. Type of Chow:
 - Dine in: Dinning in the food service establishment.

Continue

- Field Chow & Remote Site Feeding: Field feeding meals shall be the same as those provided from the regular 21-day cycle menu at the mess hall where the meals are up to transportation to field site.
- Box Chow: Box Sandwich Option.
- Recreation Meal (*Rec Meal*): Company size events.
(i.e. Family Day)
- Hot/Cold Beverage Support: *(i.e. Coffee, Water, Soup)*
- Fruit Support: Conditioning Hike Support.
(OCS/TBS Only)

B. Mess Hall: Annotate which Mess Hall will best support your messing requirements.

Note: Coordinate with respective base food service representative to acquire the best logistical Mess Hall pick-up destination for messing support.

C. Meal: As stated.
(i.e. Breakfast (B), Lunch (L), Dinner (D), Bruch (BB), Supper (DB))

D. Dates: Note all dates messing support is being requested for each meal.

Note: In the event meals are consecutive in nature (breakfast & lunch Jan 1-Jan 5), in the meals section write B – I, in date's section write 1 – 5 and state the month.

E. Pick Up Time: Select from the drop box pick meal pick up times.

Note: All meals will be picked up during respective mess halls hours of operation. (i.e. Lunch Pick up Time: 1100-1300)

F. Portions: Note how many patrons will be supported each meal.

9. SIGNATURE & DATE. Senior Staff Non-Commissioned Officers (SNCOIC), Officer in Charge (OIC), or an agencies senior official will sign and date block nine verifying the request for messing support.

10. SIGNATURE & DATE. Senior Food Service Personnel will sign and date the document verifying the approval or denial of the request.