

COMMUTED RATIONS ACTION (10110)

NAVMC 10522 (REV. 1-88) (EF)

SN: 0109-LF-063-7600

DATE _____

SECTION 1-APPLICATION OF MEMBER

FROM: _____
(Grade, name, social security no. branch of service, organization)

TO: COMMANDING OFFICER, _____

- 1. It is requested that I be authorized to subsist separately and receive a commuted ration allowance instead of being subsisted in the dining facility.
- 2. The reason for this request is:

I am married and reside with my family at _____

I am not married but reside with my (Relationship) _____ at _____

3. I understand that I AM REQUIRED TO PAY for all meals eaten in a dining facility while in receipt of commuted ration and that I AM NOT ENTITLED TO THE ALLOWANCE until the hour and date of approval stated in Section 11.

4. I CERTIFY that I will immediately notify my commanding officer of any change in conditions stated in paragraph 2 above.

SIGNATURE: _____

SECTION 11-APPROVAL OR DISAPPROVAL

DATE _____

FROM: COMMANDING OFFICER, _____

TO: _____

1. Approved effective _____
(Hour and date)

Disapproved for following reason: _____

2. Should you be discharged while this authorization is in effect, such authorization remains in full force and effect, provided you reenlist at the same station within 24 hours of such discharge.

SIGNATURE: _____ BY DIRECTION

SECTION 111-TERMINATION OF AUTHORITY TO RECEIVE COMMUTED RATIONS

DATE _____

FROM: COMMANDING _____

TO: _____

1. The authorization previously granted to you to receive commuted rations is hereby terminated to take effect for the following reason: _____
(Hour and date)

SIGNATURE: _____ BY DIRECTION

DISTRIBUTION: Original to Member
Copy to Service Record Book
Copy to Unit submitting Unit Diary