

**FAMILY HOUSING VOUCHER (11101)**

NAVMC 11051 (4-79) (EF)  
SN: 0109-LF-065-0100

**PRIVACY ACT STATEMENT**

The Privacy Act Statement for information on this form is contained on NAVMC Form 11000, Privacy Act Statement for Marine Corps Personnel and Pay Records.

HOUSING OFFICER'S INFORMATION AND SIGNATURE	I.D.	NAME OF MEMBER <i>(Last, first, middle initial)</i>		GRADE	SSN	
	UNIT OF ASSIGNMENT			STATION		
	SPOUSE	ADDITIONAL INFORMATION REQUIRED WHEN SPOUSE IS A MEMBER OF THE ARMED FORCES ON ACTIVE DUTY				
		NAME OF SPOUSE <i>(Last, first, middle initial)</i>				SSN
	BRANCH OF SERVICE		UNIT OR STATION OF ASSIGNMENT			
	QUARTERS	TYPE OF QUARTERS				EFFECTIVE DATE OF THIS ACTION
		<input type="checkbox"/> ADEQUATE		<input type="checkbox"/> INADEQUATE (Give additional information below)		
		<input type="checkbox"/> ASSIGNMENT OF QUARTERS		<input type="checkbox"/> CHANGE IN GRADE		<input type="checkbox"/> QUARTERS REASSESSED
		<input type="checkbox"/> DISPOSSESSION OF QUARTERS		<input type="checkbox"/> CHANGE IN RENTAL VALUE		<input type="checkbox"/> OTHER (Explain in REMARKS)
	ADDITIONAL INFORMATION REQUIRED IF INADEQUATE QUARTERS					
RENTAL CHARGES			RENTAL CHARGES			
ARE _____ % OF BAQ			_____ FOR MEMBER		_____ FOR SPOUSE	
REMARKS:						
SIGNATURE OF HOUSING OFFICER			TITLE		DATE	

  

COMMANDING OFFICER'S INFORMATION AND ENDORSEMENT	TYPE OF QUARTERS		EFFECTIVE START DATE	EFFECTIVE STOP DATE	UNIT DIARY NO.	
	<input type="checkbox"/> ADEQUATE <input type="checkbox"/> INADEQUATE					
	ADDITIONAL INADEQUATE QUARTERS INFORMATION			RENTAL CHARGES		
	QUARTERS CHECKAGE @ _____ %			MEMBER _____ SPOUSE _____		
REMARKS:						
SIGNATURE OF COMMANDING OFFICER			TITLE		DATE	

DISTRIBUTION BY HOUSING OFFICER: *(Authenticate all of Commanding Officer's copies)*

- Copy 1 (Original) - To Member's C.O. for endorsement and filing in Member's SRB/OQR
- Copy 2 - To Member's C.O. for endorsement and return to Housing Office
- Copy 3 - For Housing Office files
- \*Copy 4 - To spouse's C.O. for endorsement and filing in spouse's SRB/OQR
- \*Copy 5 - To spouse's C.O. for endorsement and return to Housing Office
- \*Prepare Copies 4 and 5 when required.