| NAME (Last, First, MI) | | RANK/RA | TE EMPLID | | | |
|--|---|---|------------------|---------------------------|--------------------|--|
| COMMAND (Reporting to/from) DUTY PHONE/CH | | | E/CELL PHONE | | | |
| | | | | | | |
| AILY LODGING COS | T NUMBER OF NIGHTS | COOKING FACILITIES? LOD YES OR NO | GING FACILITY | AND PHONE # | | |
| | | DEPENDENT INFO | ORMATION | | | |
| DEPENDENT NAMES (Last, First, MI) | | RELATIONSHIP | AGE | ACCOMPANIED TO ALASKA? | | |
| | | | | T S TIBLISTER | or order | |
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| | | | | | | |
| REPORTING TI | HIS IS THE | CLAIM | | | | |
| DATE MEMBER REP | ORTED TO PRESENT COM | MMAND: | | | | |
| OATE FAMILY MEM | BER(S) REPORTED TO PR | ESENT COMMAND: | | | | |
| OOCUMENTS REQUI | RED: O ENDORSED COP | PY OF PCS ORDERS | | | | |
| DOCOMENTS REQUI | O ORIGINAL ZERO | BALANCE LODGING RE | CEIPTS | | | |
| | O ITINERARY | | | | | |
| | | MS WILL INCLUDE RECOULT INCLUDE COPY OF F | | | NT | |
| TVDE OF HOUGHIG | • | | | | | |
| TYPE OF HOUSING: | O GOVERNMENT O RENTING | | | | | |
| ' | O BUYING | | | | | |
| | | | | | | |
| DEPARTURE | | | | | | |
| | er. | | | | | |
| DATE OF DEPARTURE: | | | | | | |
| DATE HHG PICKED I | JP: | | | | | |
| | R DEPARTURE TLA BEGINS (TED TO 10 DAYS PRIOR TO I | | JT BEGINS IF MEN | MBER VACATES PRIVATE S | SECTOR OR GOVERNME | |
| | | | | | | |
| DOCUMENTS REQUI | | Y OF ORDERS BALANCE LODGING RE | CEIPTS | | | |
| | O ITINERARY | RM (PROVIDED BY TRAN | JCDODT ATION (| DEFICE) | | |
| | O DD-1299 HHG FO | RW (PROVIDED BY TRAI | NSPORTATION (| OFFICE) | | |
| | | | | | | |
| FDY/LEAVE | | | | | | |
| | FAMILY ON LEAVE AWA | AY FROM DUTY STATION | UDURING THIS | PERIOD? ∏YES ∏NO |) | |
| | MES, DATES, LOCATIONS | | | | | |
| | | | AIDE TOX DAGE | 0 | | |
| WERE YOU TDY DUI *MUST INCLUDE TDY (| RING THIS PERIOD? 🗌 YI ORDERS | ES ∐ NO IF YES PROV | VIDE TDY DATE | .S: | | |
| | | | | | | |

| UNACCOM | IPANIED MEMBER | | | |
|------------|--|---|---|---|
| IF ASSIGNI | ED TO A CUTTER, IS SHII | PBOARD BERTHING C | OR BARRACKS AVAILAE | BLE? TYES NO |
| COMMANI | O SIGNATURE: | | | |
| HOUSING (| OFFICE SIGNATURE: | | | |
| MEMBER SI | GNATURE | | DATE | |
| | | | | |
| | VIEWED THE PACKET AN | D VERIFIED THE INF | ORMATION PROVIDED | T |
| UNIT ADMIN | N SIGNATURE | | DATE | |
| | NT APPROVING OFFICIA LL PROVISIONS OF THE | | | ODGING ALLOWANCE PAYABLE TO THE ABOVE |
| DEO SIGNA | TURE | | DATE | |
| | | RECOI | RD OF HOUSING SEARC | CH CH |
| BECOMES N | | AN EXTENSION OF | TLA, THE COMPLETENE | DE TO OBTAIN PERMANENT HOUSING. IF IT SS AND ACCURACY OF THIS FORM WILL SUPPORT SSING THIS CLAIM. |
| RESULTS IF | | VERNMENT QUARTE | RS OR ARE "LOCKED IN | RE NOT REQUIRED TO REPORT HOUSING SEARCH I" TO PURCHASING OR RENTING A HOME AND THE |
| | EQUIRED TO RECORD YO Y EACH AND EVERY AP | | | ACE PROVIDED BELOW. IF REPORTING, THIS MUST |
| DATE | ADDRESS | POC PHONE | UNSUITABLE/UNDESI | RABLE REASONS |
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| UNSATISFAC | CTORY SCHOOLS (FOR THOS. ETC THESE SHOULD BE LI | E WITH SCHOOL AGE CH STED ABOVE; HOWEVER | ILDREN). UNDESIRABLE RE , THESE REASONS DO NOT Q | O, DOCUMENTED UNSAFE AREA, AND DOCUMENTED ASONS INCLUDE TOO EXPENSIVE, TOO SMALL, OR NO PETS QUALIFY THE HOME AS UNSUITABLE. THE TLA AUTHORITY R FURTHER TLA ELIGIBILITY*** |