

STATEMENT FOR PAYMENT OF ACTIVE-DUTY INITIAL UNIFORM
ALLOWANCE SUBMIT TO: ARMY MILITARY PAY OFFICE (Rm 122)
BUILDING 3400
FORT LEE, VA 23801-1724

PRIVACY ACT of 1974. AUTHORITY: 10 USC Sections 3013. PRINCIPAL PURPOSE: Substantiating document establishing Soldiers right to Reimbursement of uniform allowance. ROUTINE USES: Provide means of applying for uniform allowance, disclosure is voluntary; however, Failure to provide personal data could prelude proper identification.

Name: _____ **SSN:** _____
PLEASE PRINT (Last Name, First Name, Middle Initial)

GRADE: _____ **ORGANIZATION:** _____

I request reimbursement for the active-duty uniform allowance as provided in the Department of Defense Financial management Regulation (DoD FMR Volume 7A, Chapter 30).

- A. I have not applied for, nor received an initial uniform allowance as an officer of the National Guard of the United States, Army Reserve, or Army of the United States without component under the Armed Forces Reserve Act of 1952.
- B. I have not received an initial uniform allowance in any amount as an officer. I understand that only period of duty that require wearing of the uniform are counted for entitlement to the initial uniform allowance.
- C. I am reporting/reported for active duty for a period in excess of 45 days or actually performed active duty in excess of 90 days after reporting for an indefinite period on (date) _____ in compliance of Orders Number _____ HQ _____ dated _____
- D. I was not a regular officer transferring to another Military Service.
- E. The tour of active duty or active duty for training requires/required the wearing of uniform, which I have in my possession.
- F. I have been determined physically qualified for active duty.
- G. Immediately prior to entering on active duty as an officer, my status was (OCS, student, active duty (Enlisted/Officer), ROTC, civilian, etc.) _____
- H. I executed my Oath of Office on (date) _____

(OFFICER'S SIGNATURE AND DATE)

STATEMENT FOR PAYMENT OF ACTIVE-DUTY UNIFORM ALLOWANCE

ADDITIONAL CLOTHING ALLOWANCE

SUBMIT TO: ARMY MILITARY PAV OFFICE (Room 122)

BUILDING 3400

FORT LEE, VA 23801-1724

PRNACY ACT OF 1974. Authority: 10 USC SECTIONS 3013. PRINCIPAL PURPOSE: Substantiating documents establishing Soldiers right to reimbursement of uniform allowance. ROUTINE USES: Provide means of applying for uniform allowance, disclosure is voluntary; however, failure to provide personal data could preclude proper identification.

Name: _____

PLEASE PRINT {Last Name, First Name, Middle Initial}

SSN: _____

I request reimbursement for the active-duty uniform allowance as provided in the Department of Defense Financial Management Regulation (DODFMR Volume 7 A, Chapter 30).

A. I reported for active duty or active duty for training for a period in excess of 45 days or actually, performed duty in excess of 90 days after reporting for an indefinite period on (date) _____ in compliance of Orders Number _____ HQ _____ dated _____.

B. I have not received an additional uniform allowance in excess of \$200.00 during my current tour of active duty or within a period of 2 years before entering on my current tour of duty.

C. The tour of active duty or active duty for training required the wearing of uniform, which I have in my possession.

D. During the 2-year period prior to reporting for my current tour of duty, I have not served on active duty or active duty for training for a period of more than 90 days duration as a non-regular officer.

E. Prior to this date, I have neither received nor applied for the active-duty uniform allowance authorized under the Armed Forces Reserve Act of 1952 for the tour of active duty or active-duty-for training for which this entitlement is claimed.

F. I executed my Oath of Office on (date) _____

(OFFICER'S SIGNATURE)