

DISLOCATION ALLOWANCE STATEMENT

Name:	SSN:	Order Number:
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This is the _____ (number) claim for Dislocation Allowance based on a PCS during FY _____. I have not and will not request government procured shipment of a house trailer or reimbursement for shipment at personal expense if I am claiming DLA for this PCS.

If claiming dependent DLA

Date dependent travel began	
Date dependent travel ended	

If claiming single DLA

E6 and above may elect to reside off base. E6 and below must attach a copy of the Barracks approval for Single BAH.

This is to certify that upon my transfer to _____ / homeported in _____, that I opted not to occupy government quarters (BEQ/BOQ)	I maintain residence off-base and my current address is: _____ Street/Apt # _____ City/State/Zip
_____ Member's signatures	

Mode of Transportation	City/State/Country	
	From	To

Old Address	New Address
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Place to which dependents were last transported at government expense:

Authorized POVs	
License Plate#	State

Member's Signature	Date
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