COMMISSARY PATRON SPECIAL ORDER FORM

(For use of this form, see DeCAD 40-1; OPR is DO.)

COMMISSARY NAME

☐ GROCERY DEPARTMENT ☐ MEAT DEPARTMENT ☐ PRODUCE DEPARTMENT
☐ BAKERY ☐ DELI ☐ SEAFOOD DEPARTMENT ☐ SPECIALTY SHOPS

ITEM DESCRIPTION	SIZE/THICKNESS	QUANTITY

DATE ITEMS NEEDED	PATRON'S NAME	PHONE NUMBER
EMAIL ADDRESS		
EMPLOYEE ACCEPTING ORDER	COMSY PHONE NUMBER	DATE

DeCA Form 40-1, Nov 2010 Supersedes DeCA 40-1, Jan 2000

Top copy to Patron; Bottom copy retained by Commissary (Store remarks may be annotated on the back of Commissary Copy)

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