

LETTER OF AUTHORIZATION			DATE OF REQUEST
			6/20/2013
REQUIRING ACTIVITY	GOVT AGENCY POC	GOVT AGENCY POC PHONE	GOVT AGENCY POC EMAIL
NAME (Last, First, Middle Initial)	SSN/FIN	DATE OF BIRTH	
HOME ADDRESS		CITIZENSHIP	PASSPORT # / EXPIRATION
		DEPLOYMENT PERIOD START	DEPLOYMENT PERIOD END
EMAIL	THEATER EMAIL		
CLEARANCE LEVEL w/ AGENCY	CLEARANCE DATE (MM/DD/YYYY)	JOB TITLE	SUPERVISOR/NON-SUPERVISOR Non-Supervisor/Non-Manager
COMPANY (full name)	COMPANY POC	COMPANY POC TELEPHONE	COMPANY POC EMAIL
CONTRACT NUMBER/ TASK ORDER	CONTRACT / TO START DATE	CONTRACT / TO END DATE	CONTRACT ISSUING AGENCY
	7/1/2009	6/30/2014	Dept. of the Army
NEXT OF KIN (NOK) NAME Available in SPOT	NOK RELATIONSHIP Available in SPOT	ASSIGNED KO	ASSIGNED KO TELEPHONE
IN-THEATER CONTACT	CONTACT'S PHONE		CONTACT'S EMAIL
COUNTRIES TO BE VISITED Australia, Japan, Republic of Korea, Thailand		<b>GOVERNMENT FURNISHED SERVICES</b> <input checked="" type="checkbox"/> APO/FPO/MPO/Postal Services <input type="checkbox"/> Authorized Weapon <input checked="" type="checkbox"/> Billeting <input checked="" type="checkbox"/> CAAF <input checked="" type="checkbox"/> CAC <input checked="" type="checkbox"/> Commissary <input checked="" type="checkbox"/> Dependents Authorized <input checked="" type="checkbox"/> DFACs <input checked="" type="checkbox"/> DPO <input checked="" type="checkbox"/> Excess Baggage <input checked="" type="checkbox"/> Fuel Authorized <input checked="" type="checkbox"/> Govt Furnished Meals <input checked="" type="checkbox"/> Local Access Badge <input checked="" type="checkbox"/> Mil Banking <input type="checkbox"/> Mil Clothing <input checked="" type="checkbox"/> Mil Exchange <input checked="" type="checkbox"/> Mil Issued Equip <input checked="" type="checkbox"/> Milair <input checked="" type="checkbox"/> MWR <input type="checkbox"/> None <input type="checkbox"/> Primary Care <input checked="" type="checkbox"/> Transportation	
PURPOSE			
COMPANY BILLING ADDRESS	DBA INSURANCE INFORMATION		

The government organization specified above, in its mission support capacity under the contract, authorizes the individual employee identified herein, to proceed to the location(s) listed for the designated deployment period set forth above. Upon completion of the mission, the employee will return to the point of origin. Travel being performed is necessary and in the public's service. Travel is in accordance with FAR 31.205-36 and the maximum per diem allowable under the appropriate travel regulations (Joint Travel Regulation (for AK, HI and outlying areas of the United States and US possessions), Federal Travel Regulation for CONUS and US Territories, and Dept of State's Standardized Regulations for OCONUS Foreign Areas designated by DOS).

Prior to issuance of a DoD Common Access Card (CAC), the government sponsor must ensure completion of the FBI fingerprint check with favorable results and submission of a National Agency Check with Inquiries to the Office of Personnel Management (OPM), or a DoD-determined equivalent investigation.

LOA Government Furnished Services (GFS) may be restricted due to Status of Forces Agreements (SOFA).

Resuscitative/Emergency Care is the default level of care. Unless specifically negotiated in the contract, all medical care is reimbursable. Contractor authorization aboard military aircraft will be determined by the supported commander. Necessary identification badges will be determined and provided by the supported command.



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