

DEPARTMENT OF THE AIR FORCE PACIFIC AIR FORCES

DATE:

MEMORANDUM FOR 718 CES/CEH		
SUBJECT: GUEST IN QUARTERS		
RANK/NAME:		
BRANCH OF SERVICE/UNIT:		
ADDRESS PHONE:	(work)	(cell)
EMAIL ADDRESS: I am requesting the following person/s be allowed to visit in my quarters:		
Name:	-	
Passport/Visa #:	Expiration date://_	
Name:	_ Relationship:	DOB/
Passport/Visa #:	Expiration date://_	
Name:	_ Relationship:	DOB/
Passport/Visa #:	Expiration date://_	
I understand that I must submit this form for any guest of more than 72 hours.		
I understand that this form is not valid f	For more than 90 days in a cale	ndar year.
I understand that I am responsible for the actions of the individual while they are at my home. I must inform them of all the laws, rules, and regulations that apply.		
Member Signature:		Date:/
Housing Rep Signature:		Date:/

BREAKING BARRIERS...SINCE 1947