

**FAX ORDER FORM - V**  
**ITEMS DAMAGED, FIRED, OR SUSPECT**

FAX TO: DSN 354-4696 / COM (301) 744-4696

**AUTHORIZED ORDERER NAME:** \_\_\_\_\_

**AUTHORIZATION CODE:** \_\_\_\_\_

**TELEPHONE NUMBER:** \_\_\_\_\_ **DSN:** \_\_\_\_\_ **COM:** \_\_\_\_\_

**UNIT NAME:** \_\_\_\_\_ **UNIT UIC:** \_\_\_\_\_

**LOCATION NAME:** \_\_\_\_\_ **LOCATION UIC:** \_\_\_\_\_

**REASON FOR ORDER:** Damaged/Discharged

*EXPLAIN:*

**AIRCRAFT TMS** (or Equipment Type): \_\_\_\_\_

**BUNO** (or SerNo): \_\_\_\_\_

	<b>DODIC</b>	<b>QUANTITY</b>	<b>AVAILABLE LOCALLY?</b>
1)	_____	_____	_____
2)	_____	_____	_____
3)	_____	_____	_____

**“SHIP TO” ACTIVITY** (If other than home Air Station; e.g. Deployment Site, Ship Load-out Location;  
or MALS-Ordnance Activity at MCAS):

**Activity Name:**

**UIC:**

\_\_\_\_\_

**ADDITIONAL COMMENTS/REMARKS:**

**DATE:** \_\_\_\_\_