

Headquarters U.S. Air Force

Integrity - Service - Excellence

Reserve Uniform Clothing Allowances- Enlisted



1 9 4 8 - 2 0 1 8
RESERVE

**Force Management
May 2018
Version 1**

- **Uniform Replacement- Enlisted**
- **Questions**

Uniform Replacement -Enlisted

- Fair Wear & Tear (FWT) Replacement
- Authorized replacement items every 3 years for issue items ONLY
- Member submits via myPers:
- AFRC, Enlisted, Compensation, Subject: “Uniform Request”
- AF Form 656, Clothing Request and Receipt—Male/Female
- Completing AF 656 (myPers: https://gum-crm.csd.disa.mil/app/answers/detail/a_id/31318)
 - Annotate DOD ID number in place of SSAN (SSAN not accepted)
 - Provide your ETS date in the ETS Block
 - Provide quantity in “Req’d” column (reference AFI 36-3014, Attachment 3, Table A3.1 (male) Table A3.2 (female) for authorized quantity)
 - Provide the size you require in the “Sold” column
 - Provide your physical mailing address and telephone number on the form in the empty cells underneath “Maternity Shirt” in the bottom right

- Items come ready to wear from Kentucky Logistics Operation Center (KYLOC)
 - Received uniform items:
 - Items may take up to 90 days from date of order to arrive
 - Items may be shipped as available
 - Sign and submit the signed AF Form 656 via the original myPers incident
 - Past Incidents are located by clicking on “Incidents/Messages” located on the top left corner of the myPers home page.
 - If IR receives accurate shipment
 - IR digitally signs AF Form 656 (signature of member)
 - Member returns signed AF Form 656 via myPers on the original incident
 - Past incidents are located by clicking on “Incidents/Messages” located on the top left corner of the myPers home page.
 - If IR receives inaccurate shipment
 - If damage is identified, incorrect or ill-fitting
 - Contact KYLOC within 90 days of shipment 1-888-255-1131

CLOTHING REQUEST AND RECEIPT -- MALE/FEMALE (THIS FORM IS SUBJECT TO THE PRIVACY ACT OF 1974)						CONTROL NO.	DATE
<p>AUTHORITY: 10 U.S.C. 9532, 37 U.S.C. 416 and Executive Order 9397</p> <p>PRINCIPAL PURPOSES: To account for the issue of uniform clothing items to enlisted personnel; SSAN is used for positive identification.</p> <p>ROUTINE USES: May be disclosed to any DOD component and upon request to other Federal, State, and local agencies in the pursuit of their official duties. May also be used for other lawful purposes including law enforcement and litigation.</p> <p>DISCLOSURE IS VOLUNTARY: Failure to provide the information would preclude the orderly maintenance of property accounts or prevent the issuance of clothing items. Disclosure of SSAN is voluntary.</p>							
NAME OF AIRMAN FOR WHOM REQUEST IS MADE Smith, Michael				GRADE E-7	SSAN DoD ID Number	UNIT AD unit	
EMAIL michaelsmith@yahoo.com				SALES CODE		ETS 12 months retainability	
<input type="checkbox"/> 16-Operation & Maintenance, AF		<input checked="" type="checkbox"/> 19-AF Reserve		<input type="checkbox"/> 80-ARMY		<input type="checkbox"/> Other Reimbursable Appropriated Funds (Insert Sales Code)	
<input type="checkbox"/> 17-Military Personnel, AF		<input type="checkbox"/> 23-Air National Guard		<input type="checkbox"/> 81-Navy		<input type="checkbox"/> Reimbursable Non-Appropriated Funds (Insert Sales Code)	
QUANTITY REQD	SOLD	ARTICLE	UNIT COST	TOTAL COST	QUANTITY REQD	SOLD	ARTICLE
1		Bag, Duffel, Nylon, OG			3		Shirt, Ctn/Poly, S/D, AF Shade 1650, Tuck-In (W)
1		Belt, Cotton, Riggers, Desert Sand 503					
1		Belt, Cotton, Web, Blue, w/Chromium Plate			3		Shirt, Ctn/Poly, L/D, AF Shade 1650, Tuck-In (W)
1		Boots, Temperature, Sage Green Boots					
1		Buckle, Belt, Chromium Plated			1		Shoes, Dress Leather
1		Cap, Garrison (Flight cap), AF Shade 1620			0		Skirt, Danted, Poly Serge AF Shade 1620 (W)
3		Cap, ABU					
1		Coat, All Weather w/Removable Liner			0		Slacks, Danted, Poly Serge AF Shade 1620 (W)
1		Coat, Svs, W/Poly, Serge, Blue AF Shade 1620					
4		Coat, Camouflage ABU			0		Socks, Athlete's, Crew, White (3 Pair Package)
0		Drawers, Cotton, Briefs, White, (M)			4		Socks, Liner, Poly/Nyl, Black
1		Gloves, Lea, Black, Lined, Unisex			4		Socks, Cushion Sole, Stretch, Green
1		Insulation, BOG, L/D			0		Towel, Bath, Cotton, White
1		Name Tag, Metal			4		Trousers, ABU
2		Name Tag, Plastic					
4		Name Tag, USAP			3		Trousers, W/Poly, Serge, 10oz, AF Shade 1620 (M)
4		Name Tag					
1		Jacket, Physical Training Uniform (PT)			5		Undershirt, Qtr. Sleeve, Sand
3		T-Shirt, Athlete's, PTU			5		Undershirt, Ctn, White, V-Neck (M)
1		Pant PTU					Maternity Trousers, ABU (W)
3		Trunks, PTU					Maternity Coat, ABU (W)
1		Jacket, Poly, Blue AF Shade 1605 w/mvbl Liner					Maternity Slacks, Blue (W)
1		Necktie, Four-in-Hand (M)					Maternity Shirt, Ctn/Poly (L/D or S/D) (W)
0		Neck-Tab, Blue, AF Shade 1622 (M)					Address/Phone
0		Shirt, Ctn/Poly, Long Sleeve, W/Epaulets (M)					Not Available in KYLOC Items
0		Shirt, Ctn/Poly, Short Sleeve (M)					
35		TOTAL VALUE		26			TOTAL VALUE
<p>I certify the above named airman has sufficient initial allowance clothing credit available against which the total value of items purchased has been entered on his/her military record.</p>				<p>I certify the items requested are for the airman's health and/or appearance. Total value of clothing provided is to be (Amortized at \$ _____ per month) (deducted from net pay) (Not to be utilized at Basic Training Center).</p>		<p>I certify the total value reflected hereon has been charged against pay and/or allowances due the above named airman.</p>	
SIGNATURE AND GRADE OF BASE FINANCE OFFICER Click to sign				SIGNATURE OF UNIT COMMANDER (R PROGRAM MANAGER) Click to sign		SIGNATURE & FISCAL STATION NO. OF FINANCE OFFICER Click to sign	
PROJECT CODE (For AFRES Only)				SIGNATURE, GRADE, ORGN OF AFRES PAYROLL OFFICER (For AFRES Only) Click to sign			
<p>I certify the sales code indicated is correct and the offices to be billed (and appropriation charged) are properly indicated.</p>				<p>I certify I have received the articles listed here on in the total value indicated and that they are for my own personal use or that of the person I represent and I will not dispose of them by sale, gift, loan, barter, or pledge to unauthorized personnel. NOTE: MEMBERS DO NOT SIGN THIS FORM UNTIL CLOTHING ITEMS HAVE BEEN RECEIVED.</p>			
APPROPRIATION				SIGNATURE OF MEMBER UPON RECEIPT OF CLOTHING (GRADE/SSAN) Click to sign			
OFFICE TO BE BILLED				SIGNATURE GRADE & ORGN OF AUTHENTICATING OFFICER Click to sign			

AF FORM 656, 20111129

PREVIOUS EDITIONS ARE OBSOLETE

PRIVACY ACT INFORMATION: The information in this form is FOR OFFICIAL USE ONLY. Protect IAW the Privacy Act of 1974.

- Member submits reimbursement following same steps as FWT
 - Request must be submitted & approved PRIOR to purchasing items
 - Request must be validated by Active Duty CC
 - Must have medical documentation for justification (if applicable)
 - IR is responsible for purchasing items, signing and submitting the approved AF Form 656 and OF 1164 back via the original MyPers incident
 - Complete the OF 1164 by itemizing each purchase and annotating the cost of each item
 - Maintain receipt(s) - the receipt(s) will accompany the OF 1164 claim and are a mandatory inclusion
 - IR will digitally sign in block 10 'Claimant Sign Here'
 - Items Not Available in KYLOC (not limited to)
 - Light weight blues jacket, fleece jacket, fleece hat, cotton ABUs, and steel toe boots
 - ARPC/FM will process reimbursement via direct deposit utilizing DFAS
 - NOTE: must be submitted NLT 31 Aug for processing for current FY
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MEMORANDUM FOR HQ RIO/FORCE MANAGEMENT

FROM: **Name/Rank/CAC DOD ID Number**

SUBJECT: Request for Uniform Replacement Agreement

1. I am requesting uniform replacement and per AFRCI 23-101, Materiel Management of Uniforms, paragraph 11, I understand the following:

a. Initial issue uniform replacement is authorized for Fair Wear and Tear (FWT) every three years. All requests prior to three years will be at my own expense or require further justification and approval prior to submitting request. I will be responsible for reimbursement of all costs which do not meet these requirements

b. I understand I am not eligible for new uniform items within 180 days prior to separation without unit commander approval.

c. I understand I must sign confirming receipt of clothing items and return the AF Form 656 and shipping receipt to the HQ RIO IC within 30 days of receipt of clothing.

d. I agree I will not dispose of uniforms by sale, gift, loan, barter, or pledge to unauthorized personnel.

e. I understand cold weather gear, including the sage fleece jacket and any other uniforms which were not part of the initial issue are not authorized under the Uniform Replacement Program for Air Force Reserve Members.

2. I am requesting my clothing mailed to address below:

Address:

MEMBERS SIGNATURE