Prescribed by: DoDI 1325.07

REQUEST AND RECEIPT FOR HEALTH AND COMFORT SUPPLIES								
Directive 1325.04. "	Confinement of Militation	arv Prisóne	PRIVACY AC f Defense for Personnel and ers and Administration of Mili d Clemency and Parole Aut	tary Correctional Program	ns and Facilities":	DOD Instruction 132	ties"; DOD 25.07,	
PRINCIPAL PURP military pay account	OSES: To document t if in a pay status, ar	the prison	er's request, issue, and auth gratuitously if in a non-pay st	orization for health and co atus.	omfort supplies to	be deducted from the	ne prisoner's	
disclosed to confine Notices A0190-47	ement/correctional ac DAPM-ACC, "Army C	encies for orrections	ally permitted under 5 U.S.C. use in the administration of System and Parole Board R at <u>https://dpcld.defense.gc</u>	correctional programs. For ecords," NM01650-1, "Ind	or additional infor	mation. see the Svst	ems of Records	
DISCLOSURE: Vol	untary. However, fail	ure to prov	vide all requested information	may result in an inability	to process the fo	prm.		
1. То				2. Facility/Brig		3. Date (YYYYMMDD)		
4. Requested By (Last Name, First Name, Middle Initial)						5. DoD ID Number		
6. Unit/Agency						7. Branch of Service		
comfort supplies of	described below. I un	derstand th	anding Officer to withdraw s nat the cost of these supplies tal cost of these supplies. N	s will be charged against r	ny military pay a	ccount if the balance	of my personal	
a. Quantity b. Item						c. Unit Cost	d. Cost	
(1) Requested	(2) Issued		5.	nem		C. Offic Cost	u. 0031	
9. Requested By (S	Signature)							
						e. Total Cost		
10. Approval and A	uthentication							
a. Name, Grade, and Title of Approving Officer (<i>Printed or Typed</i>) b. Signature of Approving Officer								
11. Receipt								
a. I acknowledge re comfort articles ame	ceipt of the issued he	ealth and	b. Date (YYYYMMDD)	c. Signature				
	Dollars	Cents						
DD FORM 504, NOV 2022 CLII (when filled in) Controlled by: OUSD(P&R) Pa							Page 1 of 1	