



DEPARTMENT OF THE ARMY  
HEADQUARTERS NEW YORK ARMY NATIONAL GUARD  
330 OLD NISKAYUNA ROAD  
LATHAM, NY 12110-3514

MNHF

21 February 2014


MEMORANDUM FOR SEE DISTRIBUTION

SUBJECT: Basic Allowance for Subsistence (BAS) Collection

1. Reference, DOD Financial Management Regulation, volume 7A, chapter 25, section 250105.
2. Per reference above an AGR service member being paid BAS must pay for all meals or rations received from a government mess or provided on behalf of the government. AGR Soldiers on field duty will be charged for all meals made available whether eaten or not, subject to approved missed meals. Field duty is defined as any maneuvers, war games, field exercises, or similar operations where a member is assigned to a unit being subsisted in a dining facility operated by or on behalf of the U.S. Government or with an organization drawing field rations. This includes, but not limited to Annual Training (AT), and schooling.
3. It is imperative that all AGR Soldiers understand that it is their responsibility for ensuring they submit DA Forms 4187, requesting meal collections for any period of orders that provide for rations.
  - a. Proper format for requesting meal collections is provided on the enclosed DA Form 4187 for schools and AT. Corresponding orders must accompany DA Form 4187.
  - b. Soldiers are required to submit DA Forms 4187 within 5 business days of completion of training.
4. This process will be inspected as part of the NYARNG Organizational Inspection Program.
5. Point of contact for this office is SSG Lydia Montiforte (518) 786-4926 or by email [Lydia.f.montiforte.mil@mail.mil](mailto:Lydia.f.montiforte.mil@mail.mil)

FOR THE ADJUTANT GENERAL:

Encl

  
CURTIS B. WILLIAMSON  
COL, LG, NYARNG  
Director, Federal Human Resource Office

DISTRIBUTION:  
AA, BA

**PERSONNEL ACTION**

For use of this form, see AR 600-8-6 and DA PAM 600-8-21; the proponent agency is ODCSPER

**DATA REQUIRED BY THE PRIVACY ACT OF 1974**

**AUTHORITY:** Title 5, Section 3012; Title 10, USC, E.O. 9397.  
**PRINCIPAL PURPOSE:** Used by soldier in accordance with DA PAM 600-8-21 when requesting a personnel action on his/her own behalf (Section III).  
**ROUTINE USES:** To initiate the processing of a personnel action being requested by the soldier.  
**DISCLOSURE:** Voluntary. Failure to provide social security number may result in a delay or error in processing of the request for personnel action.

1. THRU (Include ZIP Code) \_\_\_\_\_  
 2. TO (Include ZIP Code)  
 JFHQ/MNHF-AGR  
 330 OLD NISKAYUNA RD  
 LATHAM NY 12110  
 3. FROM (Include ZIP Code) \_\_\_\_\_

**SECTION I - PERSONAL IDENTIFICATION**

4. NAME (Last, First, MI) \_\_\_\_\_  
 5. GRADE OR RANK/PMOS/AOC \_\_\_\_\_  
 6. SOCIAL SECURITY NUMBER \_\_\_\_\_

**SECTION II - DUTY STATUS CHANGE (AR 600-8-6)**

7. The above soldier's duty status is changed from \_\_\_\_\_ to \_\_\_\_\_  
 effective \_\_\_\_\_ hours, \_\_\_\_\_

**SECTION III - REQUEST FOR PERSONNEL ACTION**

8. I request the following action: (Check as appropriate)

<input type="checkbox"/> Service School (Enl only)	<input type="checkbox"/> Special Forces Training/Assignment	<input type="checkbox"/> Identification Card
<input type="checkbox"/> ROTC or Reserve Component Duty	<input type="checkbox"/> On-the-Job Training (Enl only)	<input type="checkbox"/> Identification Tags
<input type="checkbox"/> Volunteering For Oversea Service	<input type="checkbox"/> Retesting in Army Personnel Tests	<input type="checkbox"/> Separate Rations
<input type="checkbox"/> Ranger Training	<input type="checkbox"/> Reassignment Married Army Couples	<input type="checkbox"/> Leave - Excess/Advance/Outside CONUS
<input type="checkbox"/> Reassignment Extreme Family Problems	<input type="checkbox"/> Reclassification	<input type="checkbox"/> Change of Name/SSN/DOB
<input type="checkbox"/> Exchange Reassignment (Enl only)	<input type="checkbox"/> Officer Candidate School	<input checked="" type="checkbox"/> Other (Specify)
<input type="checkbox"/> Airborne Training	<input type="checkbox"/> Asgmt of Pers with Exceptional Family Members	<input type="checkbox"/> MEAL DEDUCTIONS

9. SIGNATURE OF SOLDIER (When required) \_\_\_\_\_

10. DATE (YYYYMMDD) \_\_\_\_\_

**SECTION IV - REMARKS (Applies to Sections II, III, and V) (Continue on separate sheet)**

SOLDIER ATTENDED ANNUAL TRAINING AT \_\_\_\_\_ FROM \_\_\_\_\_ TO \_\_\_\_\_.

DURING THAT PERIOD, SOLDIER WAS/WAS NOT PROVIDED MEALS.

\*\*ORDERS ATTACHED\*\*

**SECTION V - CERTIFICATION/APPROVAL/DISAPPROVAL**

11. I certify that the duty status change (Section II) or that the request for personnel action (Section III) contained herein -

HAS BEEN VERIFIED  RECOMMEND APPROVAL  RECOMMEND DISAPPROVAL  IS APPROVED  IS DISAPPROVED

12. COMMANDER/AUTHORIZED REPRESENTATIVE \_\_\_\_\_

13. SIGNATURE \_\_\_\_\_

14. DATE (YYYYMMDD) \_\_\_\_\_



DEPARTMENT OF THE ARMY  
HEADQUARTERS NEW YORK ARMY NATIONAL GUARD  
330 OLD NISKAYUNA ROAD  
LATHAM, NY 12110-3514

OFFICE SYMBOL

DATE

MEMORANDUM FOR AGR Manager, JFHQ, MNHF-AGR, 330 Old Niskayuna Rd.  
Latham, NY 12110

SUBJECT: Basic Allowance for Subsistence (BAS) Collection

1. It has been verified that the following Active Guard Reserve (AGR) soldier(s) listed have paid for their meals during Annual Training (AT) for the period of \_\_\_\_\_.

<u>NAME</u>	<u>SSN</u>
SGT Joe Snuffy	123-45-6789
SSG Gomer Pile	987-65-4321
SSG John Smith	111-11-1111
MAJ Peter Griffin	222-22-2222

2. POC for this memorandum is \_\_\_\_\_ at \_\_\_\_\_.

SIGNATURE BLOCK