## MCAS IWAKUNI SPECIAL MEAL REQUEST INSTRUCTIONS

## SMR Bulk Meal Roster Submission Form excel

Part 1 Enter global information for this request

- (1) Request Name. Event Name i.e., Field Meet
- (2) Unit/Command. Squadron/Section/Division
- (3) Point of Contact Name. Requestors contact Rank and Name
- (4) Point of Contact email. Requestors email address
- (5) Group Leader Name. Person picking up the meals
- (6) Group Leader EDIPI. Group Leader will not be charged, EDIPI is required in order to run the transaction in the Point Of Sales
- (7) Notes. Any additional information necessary for this event

Part 2 Set up information for each group

- (1) Group 1. Each Branch/Component/Payment type requires an additional Group
- (2) Branch. Select from drop down the Branch of Service i.e., Marine
- (3) Component. Select from drop down the status for each branch of service. Regular is Active Duty
- (4) Payment. Select from drop down the payment method. SIK will be utilized for "MealCard" and can be used for Marines who receive BAS as "Payroll Deduction." Cash and Check are acceptable forms of payment and will use the Cash payment option. Credit Card is currently unavailable aboard MCAS Iwakuni. Reimbursable is only used with an approved ACSA and prior planning with Base Food Service Office.
- (5) # Attendees. Enter the number of EDIPI's listed per Group.
- (6) Attendee EDIPIs. All military service members DoD ID number is required.

## **Special Meal Request pdf**

- (1) From. Requesting Unit Squadron / Section / Division (Same as excel document #2)
- (2) Date of Request. Date the request was submitted to Food Service Division OMB.
- (3) LName, FName, MI, Rank & Phone. Requestors Contact information.
- (4) To. Select from the drop down the recommended Mess Hall to support your request.
- (5) Type of Subsistence Support Requested. Select the type of meal requested. Recreational Meal, Box Meal, and Force March menus can be found at Food Service Marines.mil website: <u>https://www.mcasiwakuni.marines.mil/Organizations/Station/Food-Service/</u>. Containerized Meal is Field Chow for the standard 28-day meal being served at the Mess Hall, specific menus can be found at the above links.
- (6) Requested Meal Period. Select the meal you are requesting.
- (7) Date and Time of Pickup. Date and Time you are requesting to pick up the meal(s).
- (8) Feeding Site. Location you will be feeding this meal.
- (9) Branch / Component. Select from the drop down the branch and component. (Same as excel document #2 and #3)
- (10) Payment. Select from the drop down the payment type. (Same as excel document #4)
- (11) Qty. Enter the total number for each Group (As separated on excel document)
- (12) Branch / Component. Same as #9 above.
- (13) Payment. Same as #10 above.
- (14) Qty. Same as #11 above.
- (15) Total Meals Requested. Enter the total number of all Groups combined.
- (16) Group Leader EDIPI. Same as excel document #6.
- (17) Justification for Request. Request name. Same as excel document #1.
- (18) Command Representative. Signature of Requestor submitting Special Meal Request.

Base Food Service will validate the Bulk Meal Submission Roster and assign to a Mess Hall for support. If there are discrepancies with the roster, Base Food Service will contact the unit to update the roster or proceed with current version.

\*\*Marine Corps Food Management Information System (MCFMIS) validates the Bulk Meal Submission Roster from Marine Corps Total Force System (MCTFS).\*\*

## **SPECIAL MEAL REQUEST**



SPE SPE	CIAL MI	EAL REQ	UEST MCAS	
1. FROM: REQUESTING UNIT			2. DATE OF REQUEST (MM/DD/YYYY)	
3. LNAME, FNAME, MI, RANK, & PHONE		4. TO: (MESS HALL)		
5. TYPE OF SUBSISTENCE SUPPORT REQUESTED	6	. REQUESTED MEAL PERI	IOD(S)	
7. DATE AND TIME OF PICKUP (MM/DD/YYYY/HHMM)	8	. FEEDING SITE (LOCATIC	ON)	
9. BRANCH / COMPONENT	10. PAYMENT 11. QT	TY 12. BRANCH / COMPO	ONENT 13. PAYMENT 14. QTY	
15. TOTAL MEALS REQUESTED 16. GROUP LEADE	R EDIPI	17. JUSTIFICATION FOR R	REQUEST (i.e. RIFLE RANGE, UNIT FIELD MEET)	
REQUESTING UNITS MUST NOTIFY THE M PRIOR TO PICK UP; FOR EXAMPLE, CHAN	IESS HALL MANAG GES TO THE NUME	ER OF ANY CHANG BER OF PERSONNEL	GES TO THE SPECIAL MEAL REQUEST L OR CHANGES TO PICK UP TIME.	
REQUESTING UNITS ARE RESPONSIBLE T THE RESPECTIVE MESS HALL AT LEAST (	O OBTAIN FOOD C ONE DAY PRIOR TO	ONTAINERS FROM ( ) PICK UP.	MWSS-171 FIELD MESS AND DELIVER TO	
SPECIAL MEAL REQUEST MUST BE SUBM BASE FOOD SERVICE WILL DETERMINE F I CERTIFY THAT I WILL SUBMIT THE FUL				
18. COMMAND REPRESENTATIVE				
-			VE MESS HALL FOR SUPPORT	
FROM:	FOR BASE FOOD S	TO: (MESS HALL)		
REQUEST ID NUMBER (CREATED IN POS BACKOFFICE)				
DATE SMR PRE-VALIDATED		DATE REQUEST AI	PPROVED	
SIGNATURE OF INDIVIDUAL CREATED SMR POS BACKC	FFICE	SIGNATURE OF IND	DIVIDUAL APPROVED SMR POS BACKOFFICE	
	FOR MESS	HALL USE ONLY		
FROM: (MESS HALL MANAGER )		TO: (BASE FOOD SER	RVICE)	
MESS HALL MANAGER SIGNATURE DA		DATE ENTERED INT	FO POS	
	FOOD SERVICE PO	NINTS OF CONTACTS		
BASE FOOD SERVICE253-3064FOOD TECHNICIAN253-6740	R. G. ROBINSON MESS FLIGHT LINE MESS H	ALL 255-1200/1202	MWSS-171 FIELD MESS 253-3865/3332	
OMB: IWKN_LOG_FOOD_SERVICE@USMC.MIL	NORTH SIDE MESS HA	ALL 253-2066/2114		

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