

<b>HEADCOUNT RECORD</b>				Accounts for meals sold in a dining facility, flight kitchen or field feeding				Serial No.			
ORGANIZATION OR DINING FACILITY								DATE			
Meal/Flight Meal Rate For Meal Periods Shown		B/L/D/M		\$		\$		Operating Charge for Meals Shown		\$	
				\$		\$				\$	
<b>COLUMN A</b>						<b>COLUMN B</b>					
<i>NAME</i>	<i>Grade</i>	<i>Meal Period</i>	<i>DoD ID Number</i>	<i>Sales Amount</i>	<i>Op Chg</i>	<i>NAME</i>	<i>Grade</i>	<i>Meal Period</i>	<i>DoD ID Number</i>	<i>Sales Amount</i>	<i>Op Chg</i>
1.						26.					
2.						27.					
3.						28.					
4.						29.					
5.						30.					
6.						31.					
7.						32.					
8.						33.					
9.						34.					
10.						35.					
11.						36.					
12.						37.					
13.						38.					
14.						39.					
15.						40.					
16.						41.					
17.						42.					
18.						43.					
19.						44.					
20.						45.					
21.						46.					
22.						47.					
23.						48.					
24.						49.					
25.						50.					
						# of SIK Meals from Column B			\$	Operating Charge from Column B	\$
# of SIK Meals from Column A			\$	Operating Charge from Column A	\$	# of SIK Meals from Column A & B			\$	Operating Charge from Column A & B	\$

**PRIVACY ACT STATEMENT**

**AUTHORITY:** 10 U.S.C., Chapter 40; 37 U.S.C., Chapter 9; EO 9397, November 1943  
**PRINCIPAL PURPOSES:** Used to authorize and verify the Subsistence-in-Kind entitlement; record the numbers of people subsisting; and account for cash collected.  
**ROUTINE USES:** Information may be disclosed to the Department of Justice, and to federal, state, local or foreign law enforcement authorities for investigating or prosecuting a violation or potential violation of law.  
**DISCLOSURE:** Disclosure of SSN is voluntary. However, members otherwise entitled to Subsistence-in-Kind will not be provided a meal at no cost without the SSN, since the SSN is used to verify the entitlement.

COLUMN C							COLUMN D						
# of SIK Meals from Column A & B		Sales Amount from Column A & B	\$	Operating Charge from Column A & B	\$		# of SIK Meals From Column A, B, & C		Sales Amount From Column A, B, & C	\$	Operating Charge From Col A, B, & C	\$	
NAME		Grade	Meal Period	DoD ID Number	Sales Amount	Op Chg	NAME		Grade	Meal Period	DoD ID Number	Sales Amount	Op Chg
51.							72.						
52.							73.						
53.							74.						
54.							75.						
55.							76.						
56.							77.						
57.							78.						
58.							79.						
59.							80.						
60.							81.						
61.							82.						
62.							83.						
63.							84.						
64.							85.						
65.							86.						
66.							87.						
67.							88.						
68.							89.						
69.							90.						
70.							91.						
71.							92.						
# of SIK Meals from Column C		Sales Amount from Column C	\$	Operating Charge from Column C	\$		# of SIK Meals from Column D		Sales Amount from Column D	\$	Operating Charge from Column D	\$	
<i>Refund Data</i>							<i>Total All Cash Collected</i>						
<i>NAME</i>		<i>Grade</i>	<i>Meal Period</i>	<i>Meal Type*</i>	<i>Amount Refunded</i>		<i>Less Refunds</i>					\$	
a.					\$		<i>Cash Overages/Shortages</i>					\$	
b.					\$		<i>Net Cash for Turn-In</i>					\$	
c.					\$		<i>Total All SIK Meals</i>		<i>Total # of Cash Meals</i>		<i>Total Discount Rate Collected</i>		<i>Total Operating Charge</i>
<i>Explanation for Refunds:</i>							<i>Explanation of overages/shortages</i>						
Signature and Grade of Facility Supervisor							Signature and Grade of Person Making Collection						

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