

**Army Food Management Information System (AFMIS) Access Request Form**  
**[The proponent agency is G-4.]**

RCS:RCLG-013(R1)

1a. Unit:	<input type="text"/>	6. Effective Date:	<input type="text"/>
1b. UIC	<input type="text"/>	<input type="text"/>	<input type="text"/>
1c. USE DODAAC:	<input type="text"/>	<input type="text"/>	<input type="text"/>
1d. Unit Address:	<input type="text"/>		
1e. City:	<input type="text"/>	1f. State	<input type="text"/>
1g. Zip Code:	<input type="text"/>	7. Intermediate Access	<input type="checkbox"/>

**AFMIS Operators:** The following individual(s) request AFMIS access; have read and understand USARC Food Program Policies. Individual(s) is (are) delegated the authority to request and receive subsistence. This delegation expires on 30 September following the effective date. AFMIS requires log in every 35 Days.

<b>2a. Rank/Name:</b>	<input type="text"/>		
2b. PKI (DOD ID CARD #):	<input type="text"/>	2f. Primary POC:	<input type="checkbox"/>
2c. Phone Number:	<input type="text"/>		
2d. E-mail Address:	<input type="text"/>		
2e. Signature:	<input type="text"/>		
<b>3a. Rank/Name:</b>	<input type="text"/>		
3b. PKI (DOD ID Card #):	<input type="text"/>		
3c. Phone Number:	<input type="text"/>		
3d. E-Mail Address:	<input type="text"/>		
3e. Signature:	<input type="text"/>		
<b>4a. Rank/Name:</b>	<input type="text"/>		
4b. PKI (DOD ID Card #):	<input type="text"/>		
4c. Phone Number:	<input type="text"/>		
4d. E-mail Address:	<input type="text"/>		
4e. Signature:	<input type="text"/>		
<b>5a. Commander's Name:</b>	<input type="text"/>	5c. Rank:	<input type="text"/>
5b. Commander's Signature:	<input type="text"/>		

## Instructions for Completing the Army Food Management Information System (AFMIS) Access Request Form

Item 1a. Enter the name of the unit requesting access.

Item 1b. Enter the associated UIC and derivative UIC(s).

Item 1c. Enter the respective DODAAC(s).

Item 1d. Enter the unit's street address.

Item 1e. Enter the unit's city.

Item 1f. Enter the unit's state.

Item 1g. Enter the unit's zip code.

Item 2a. Enter the name of the individual requesting access in the format last name, first name, middle initial.

Item 2b. Enter the Public Key Infrastructure (PKI) number located on the back of DOD id cards.

Item 2c. Enter the requester's phone number in the format (area code) and seven digit number.

Item 2d. Enter the requester's e-mail address.

Item 2e. Enter the requester's signature.

Item 2f. Check this block if the requester is the primary point of contact for the unit(s).

Item 3a. Enter the name of the individual requesting access in the format last name, first name, middle initial.

Item 3b. Enter the Public Key Infrastructure (PKI) number located on the back of DOD id cards.

Item 3c. Enter the requester's phone number in the format (area code) and seven digit number.

Item 3d. Enter the requester's e-mail address.

Item 3e. Enter the requester's signature.

Item 4a. Enter the name of the individual requesting access in the format last name, first name, middle initial.

Item 4b. Enter the Public Key Infrastructure (PKI) number located on the back of DOD id cards.

Item 4c. Enter the requester's phone number in the format (area code) and seven digit number.

Item 4d. Enter the requester's e-mail address.

Item 4e. Enter the requester's signature.

Item 5a. Enter the commander's name in the format last name, first name, middle initial.

Item 5b. Enter the commander's signature only. This may not be a delegated individual with signature authority.

Item 5c. Enter the commander's rank.

Item 6. Enter the effective date, this should be 1 October of the current FY or for recertification the next FY.

Item 7. Check this block if the requester is requesting access as an intermediate command.