



**DEFENSE LOGISTICS AGENCY
HEADQUARTERS
8725 JOHN J. KINGMAN ROAD
FORT BELVOIR, VIRGINIA 22060-6221**

DF-FF

MEMORANDUM FOR CYP ADMINISTRATIVE STAFF

SUBJECT: Request for Exception to Policy / Extension / Waiver / Reconsideration of Fees

CHILD'S NAME(S): _____

SPONSOR'S NAME: _____

HOME PHONE: _____ WORK: _____

NATURE OF REQUEST: _____

REASON FOR EXCEPTION/RECONSIDERATION: (please give a brief description, include dates):

(Sponsor/Spouse's Signature)

(Date)

COMPLETED BY

Director of Family, Morale, Welfare & Recreation

DFMWR SIGNATURE: _____

DATE: _____

APPROVED NOT APPROVED REMOVAL OF LATE FEES: YES NO

APPROVAL CONDITIONS / REASON FOR DENIAL:

Center Directors Notes: