ISSUED TO (Last, First, MI)

MEAL CARD CONTROL REGISTER

For use of this form, see AR 600-38; the proponent agency is DCS, G-4.

MEAL CARD NUMBER a.	DATE OF ISSUE b.	DATE OF TURN IN, LOSS OR DESTRUCTION c.	REASON FOR ACTION d.	SIGNATURE OF RECIPIENT e.
DA 500M 4000			TIONS ARE ORDER FIF	ADD LC v4.00