

QUARTERS ALLOWANCE CERTIFICATE
PHS Commissioned Officer Without Dependents

NAME OF OFFICER (Last, First, Middle Initial)	GRADE	SOCIAL SECURITY NUMBER
DUTY STATION ADDRESS		DUTY STATION TELEPHONE NUMBER (Area Code:)

1. I certify that the facts stated and disclosed in this certificate are true and correct for the period stated below. I did **not** occupy any government quarters or housing facilities, adequate or inadequate, under the jurisdiction of any of the uniformed services except for the following periods (if NONE, so state):

FROM	TO

2. I further certify that my occupancy of Government quarters during the period stated in Item 1 above was under one of the following conditions (check one):

- (a) Occupied assigned adequate quarters for which period I was not paid quarters allowances.
- (b) Voluntarily occupied quarters that were determined to be "inadequate" by the officer in charge of quarters for which period I was not paid quarters allowances.
- (c) Occupied Government quarters on a rental basis for which period I was paid quarters allowances. (A copy of the rental agreement was on file in the payroll office.)
- (d) Occupied Indian Health Service Rental Quarters.
- (e) Other (Specify): _____

3. DEFINITION OF GOVERNMENT QUARTERS

The term "Government quarters," unless otherwise qualified, means any sleeping accommodations owned or leased by the United States Government, or furnished by a foreign government either under agreement with the United States or on a complimentary basis, including dormitories, Bachelor Officer Quarters (BOQ), Visiting Officer Quarters (VOQ), or similar facilities, regardless of whether or not a service charge is made. (Service charges normally are to cover costs of laundering linen, janitorial services, etc., and should not be considered as rent.)

4. REMARKS:

IMPORTANT

Penalty for presenting false claims or making false statements in connection with claims: Fine of not more than \$10,000 or imprisonment of not more than 5 years or both. Act of June 25, 1948, 18 U.S.C. 287, 1001.

SIGNATURE OF OFFICER	DATE
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