INTRODUCTION

Commissioned Corps Personnel Manual (CCPM) Pamphlet No. 56, "Information on Overseas Duty," provides information that will be useful to you in preparing for a temporary or permanent assignment Outside the Continental United States. Many of the forms you need to claim special allowances payable to you as an officer stationed overseas are included in the folder containing this pamphlet. Most of the topics discussed are described more fully in the cited CCPM issuances. Refer to these issuances if you have additional questions after reading this pamphlet.

This pamphlet does not take the place of any regulation. In any case where this pamphlet conflicts with the CCPM or the Joint Federal Travel Regulations (JFTR), these latter documents have final authority.

The CCPM, pamphlets, and forms are available on the Division of Commissioned Personnel's Web site—http://dcp.psc.gov. The JFTR is accessible online at the following address—http://www.dtic.mil/perdiem/.

NOTE: The travel and transportation allowance information contained in this pamphlet is based on the JFTR. If you are being detailed to the U.S. Agency for International Development or the Peace Corps, the regulations of these organizations will apply. Consult the appropriate agency for information.
TABLE OF CONTENTS

I. PRIOR TO DEPARTURE ................................................................. 1
   Passports and Visas ............................................................... 1
   Travel ..................................................................................... 1
   General .................................................................................. 1
   Inoculations ............................................................................ 1
   Medical Care ........................................................................... 2
   Financial Matters ....................................................................... 2
   Wills ....................................................................................... 2
   Malpractice Coverage ................................................................. 3

II. SHIPMENT OF HOUSEHOLD GOODS ............................................. 3

III. PAY AND ALLOWANCES ............................................................ 3
    Dislocation Allowance (DLA) ...................................................... 3
    Cost of Living Allowance (COLA) ............................................... 4
    Overseas Housing Allowance (OHA) [Not Applicable in Alaska and Hawaii] ........ 5
    Move-In Housing Allowance (MIHA) ........................................... 5
    Temporary Lodging Allowance (TLA) .......................................... 6
    Family Separation Allowance (FSA) ........................................... 7
    Education Allowance ................................................................... 7
    Basic Allowance for Housing (BAH) [Alaska and Hawaii Only] .............. 7
    Designation of Payroll Address .................................................. 7

IV. UPON ARRIVAL AT AN OVERSEAS STATION ..................................... 8
    Medical Care Overseas ............................................................. 8
    Officers ................................................................................... 8
    Dependents ............................................................................. 9
    Contact Embassy or Consulate ................................................. 9

V. SUMMARY .................................................................................. 9
   List of Forms Included in this Packet ........................................... 10
   Addresses and Phone Numbers for Further Information ...................... 11
   Checklist .................................................................................. 12
   Information Log ......................................................................... 13
   Personal Data Log ..................................................................... 13
   Acronyms ................................................................................... 14
I. PRIOR TO DEPARTURE

PASSPORTS AND VISAS

You and your dependents must obtain passports when assigned to a duty station outside the United States and its territories. Before passports can be issued, you and your dependents will be required to show proof of your U.S. citizenship. Consult your administrative office or travel office for necessary details and arrangements.

In some cases you will need a visa for the country in which your new duty station is located. Your administrative office or personnel office will assist you in obtaining all visas required in connection with your assignment. If you plan to visit any country in which you will not be on official business, you must obtain visas, if required, for those countries on your own.

TRAVEL

When a final decision is made concerning your overseas assignment, contact your administrative office or travel office for travel and transportation arrangements for you and your dependents.

GENERAL

For tips on what to wear and what to pack for your trip, as well as information on the climate, customs regulations, currency, and/or history of the countries outside the United States and its territories that you will visit, you may wish to visit Internet sites or contact local embassies for literature, guide books, maps, etc.

Examine your personnel order carefully and be sure you understand clearly all areas that your orders define. Conditions will vary according to terms of your assignment, i.e., nature of position, type of agreement, whether it is a detail, etc. The location of your position does not affect your status as an officer of the Public Health Service (PHS) Commissioned Corps. If you have any questions about your personnel orders, consult your administrative office or personnel office before leaving for your assignment.

INOCULATIONS

Inoculation rules for international travel are standardized through an agreement entitled, "International Sanitary Regulations of the World Health Organization." If you and your dependents fail to obtain the required inoculations, you may encounter difficulties and long delays enroute, and possible difficulty upon return to the United States. The nearest Uniformed Services medical facility should be contacted to find out what inoculations you and your dependents need before traveling to your overseas duty station.

Immunizations should be obtained at the nearest Uniformed Services facility several weeks in advance of leaving the United States. The physician administering the immunizations should furnish certificates of immunization for you and your dependents to serve as proof that you received all necessary inoculations. Carry these certificates with you when you travel because it may become necessary to prove you have had required inoculations.
MEDICAL CARE

In addition to receiving all necessary inoculations, officers and dependents are advised to have medical exams prior to leaving the United States and be assured of their health status because medical care may not be available for some major health problems. All routine care (medical and dental) should be taken care of prior to leaving the United States. The results of your examinations should be forwarded to the following address:

Division of Commissioned Personnel
ATTN: Medical Affairs Branch
5600 Fishers Lane, Room 4C-06
Rockville, MD 20857-0001

Be sure to include with the record of the medical and dental examinations any pertinent health information such as whether you are taking any prescription drugs. If you or anyone else in your family has any physical condition that may require emergency care, carry some identification which indicates the type of medical condition of the individual concerned. Those with chronic problems that require prescription drugs should be certain that the drugs will be available in the country of assignment and that they have an adequate supply with them to last until they reach medical care.

Before you depart, determine where the nearest military medical facility is in relation to your overseas duty station should you have need to use the facility. Talk to a Health Benefits Advisor at the nearest military facility or call the Medical Affairs Branch, Division of Commissioned Personnel (DCP), (1-800-368-2777 or 301-594-6330) to find out about the nearest military facility to your Outside the Continental United States (OCONUS) duty station.

Also, before leaving the United States be sure to discuss with your program both the extent of benefits for you and your dependents and the procedures to follow regarding routine care, emergency care, inpatient hospitalization, if necessary, and what to do should it become necessary to be medically evacuated. In addition, request information on the health conditions of the country to which you are assigned to determine if chemoprophylaxis will be necessary either prior to, during, or after leaving the area.

Orientation regarding specific care available at the duty assignment is the responsibility of the assigning program.

FINANCIAL MATTERS

Be sure to take sufficient money with you to cover approximately 1 month's lodgings and food. Until you are established at a permanent address, it may take some time for your paycheck to reflect the special allowances to which you may be entitled, such as Cost of Living Allowance (COLA), Overseas Housing Allowance (OHA), Basic Allowance for Housing (BAH) [Alaska and Hawaii only], and/or Temporary Lodging Allowance (TLA).

Try to anticipate what documents you may need while overseas, and whenever possible take copies of them with you. All credit cards that are not internationally recognized, and other valuable documents and items, should be left in a safety deposit box at your financial institution. You may wish to leave a Power of Attorney with your financial advisor, lawyer, or a close relative.

WILLS

For the benefit of your dependents, prepare a will prior to departure. This protects your beneficiaries and estate should anything unexpected happen to you.
MALPRACTICE COVERAGE

INSTRUCTION 6, Subchapter CC29.9, “Defense of Suits Involving Charges of (1) Medical Professional Liability or Negligence, or (2) Liability or Negligence Incident to Operation of a Motor Vehicle,” of the Commissioned Corps Personnel Manual (CCPM) should be consulted by officers assigned to foreign countries prior to leaving for an assignment.

II. SHIPMENT OF HOUSEHOLD GOODS

CCPM Pamphlet No. 11, "Shipments of Household Goods," and form PHS-4013-1, "Application for Shipment of Household Goods," will be provided to you by your Agency/Operating Division (OPDIV)/Program and are also available on the DCP Web site—http://dcp.psc.gov. CCPM Pamphlet No. 11 provides the information you need to prepare for shipping your household goods and automobile to your new station. Read carefully the part entitled "Shipments Related to Assignments Outside the Continental U.S."

You may wish to ship a portion of your household goods by an expedited method. By doing this, you will have some of the essential items for housekeeping when you first arrive. However, the weight of all items shipped by expedited mode is chargeable to your total weight allowance.

III. PAY AND ALLOWANCES

There are a number of special allowances to which you may be entitled when you are assigned to a station Outside the Continental United States (OCONUS). These allowances are in addition to your regular pay and allowances. These allowances are established by a special committee called the Per Diem, Travel and Transportation Allowance Committee. This committee is made up of the Assistant Secretaries of the Army, Navy, and Air Force, the Coast Guard Commandant, the Surgeon General of the PHS, and the Director of the Commissioned Corps of the National Oceanic and Atmospheric Administration. Adjustments in any of these allowances must be personally approved by these officials. The allowances may include:

1. Dislocation Allowance
2. Cost of Living Allowance
3. Overseas Housing Allowance [not applicable in Alaska or Hawaii]
4. Move-In Housing Allowance
5. Temporary Lodging Allowance
6. Family Separation Allowance
7. Education Allowance
8. Basic Allowance for Housing [Alaska and Hawaii Only]

1. DISLOCATION ALLOWANCE (DLA)

You may be entitled to DLA if you relocate your household on a permanent change of station (PCS) order or incident to an emergency evacuation. DLA is nontaxable income meant to partially reimburse you for expenses incurred in closing out your household in one location and reestablishing it in another. The amount of DLA can be found in the Joint Federal Travel Regulations (JFTR) Table U5G-1, and is not normally payable for more than one PCS during a fiscal year. This allowance is payable for permanent changes of station within the United States as well as outside the United States. DLA is not payable for:
a. calls to active duty;
b. changes of station between locations within the corporate limits of the same city;
c. separation from active duty as a commissioned officer; or
d. single officer moving into Government quarters.

HOW TO CLAIM DLA

You apply for DLA on the travel voucher you complete in connection with your move. This allowance is paid by the Agency/Operating Division (OPDIV)/Program that pays for your travel, transportation, and shipment of household goods. Therefore, you should submit this claim to the office to which you send your travel voucher, not to the Compensation Branch, DCP.

2. COST OF LIVING ALLOWANCE (COLA)

COLA is a nontaxable allowance authorized to be paid members assigned to most overseas areas for the purpose of enabling the member to maintain approximately the same standard of living as he or she would have in the Continental United States (CONUS). The rate of COLA to be paid is based on an annual survey of similar "market baskets" within CONUS and at individual locations overseas. If the cost overseas exceeds the CONUS cost, a rate is established based on the member's grade, base pay, entry date, and the number of dependents actually residing in a member's household in the applicable overseas area.

If a COLA rate has been established by the Per Diem, Travel and Transportation Allowance Committee for a particular area, COLA is authorized to be paid beginning on the date the member reports to the assigned overseas duty station unless the member is residing in temporary lodging and receiving or eligible to receive Temporary Lodging Allowance (TLA) at the full rate. Once eligibility for COLA has been established, the member will continue to receive COLA until:

a. the day prior to his or her departure from the overseas area; or
b. the day prior to entering temporary lodging if the member will be eligible to receive TLA at the full rate, whichever date is earlier.

If you or your dependents return to CONUS for any reason (vacation, etc.) for periods in excess of 30 consecutive days, your COLA will be reduced or discontinued for the time spent in CONUS in excess of 30 days. If your dependents return to CONUS to attend school, the entitlement is reduced as of the day following the day of departure. The Compensation Branch, DCP, must be notified in writing (see address below) of the following: (1) how many dependents are out of the area; (2) their departure date; and (3) their return date.

HOW TO CLAIM COLA

Submit form PHS-6059, "Request for Overseas Station Allowances," within 5 days of your arrival at your overseas duty station to:

Division of Commissioned Personnel
ATTN: Compensation Branch
5600 Fishers Lane, Room 4-50
Rockville, MD 20857-0001
Based on the information you report on the certificate, the Compensation Branch will audit your pay record and, if applicable, start paying you COLA.

3. OVERSEAS HOUSING ALLOWANCE (OHA) [Not Applicable in Alaska and Hawaii]

Members stationed overseas, other than in Alaska or Hawaii, who live on the local economy, are eligible to receive OHA. Simply stated, the rate of OHA a member receives is not less than BAH-II (Basic Allowance for Housing-II) for the member's grade and dependency status and not more than the preestablished "rent cap." If a member owns his or her own quarters, the "rent" will be determined by dividing the purchase price of the residence (does not include closing costs, etc.) by 120 to determine the monthly rate of rent.

In addition, the member will receive a utility/recurring maintenance allowance for utilities (providing the utilities are not included in the rent). The amount received in each of these elements of pay will be determined by (1) whether a member is with or without dependents, and (2) whether the member shares quarters with someone else other than his or her immediate family and to what degree utilities are furnished. An officer married to another member of the Uniformed Services and who resides with that member in the same household will be considered as sharing quarters. If quarters are shared, OHA will be based on only his or her "share" of the rent (total rent divided by the number sharing), not the amount specified in the lease/agreement.

OHA will be started for the member if he or she lives on the local economy at the minimum rate or BAH-II rate which can be found in the Department of Defense Financial Management Regulation (DoDFMR) Volume 7A, Table 26-12. If an OHA "rent cap" has been preestablished by the Per Diem, Travel and Transportation Allowance Committee, OHA is authorized to be paid only after you arrive at the station and begins on the effective date of a rental agreement, if renting, or the move-in date if you own the residence.

NOTE: If you are assigned to Alaska or Hawaii, you will not be eligible to receive OHA. You will receive BAH-I which will start on your date of arrival at your duty station.

HOW TO CLAIM OHA

If not assigned to Alaska or Hawaii, attach an English language copy of your rental agreement or purchase contract to form PHS-6059. OHA will not be paid to a member assigned to an area with a "rent cap" prior to receipt of form PHS-6059 and supporting documentation.

4. MOVE-IN HOUSING ALLOWANCE (MIHA)

The MIHA is a component of the OHA. The details relating to this allowance are included in Appendix N of the JFTR. When occupying privately-leased/owned quarters overseas, members may incur up-front costs for items such as transformers, utility hookups, perhaps major appliances, and, on occasion, nonrecoverable real estate agent fees equivalent to 1 or 2 months' rent.

MIHA has three components:

(1) MIHA/Miscellaneous will reflect average expenditures made by members to make their dwellings habitable. This lump-sum payment (receipts not required) will recognize that items such as sinks, toilets, light fixtures, kitchen cabinets, door/window locks, and a refrigerator and stove are sometimes not provided in overseas dwellings. The amount payable will be prescribed in Appendix K of the JFTR.

(2) MIHA/Rent will cover reasonable rent-related expenses in total (receipts required). These
are fixed, one-time, nonrefundable charges levied by the landlord, the landlord's agent, or a
government that the member must pay before or upon occupying a dwelling place.
Examples are real estate agent fees, redecoration fees, and one-time lease taxes.
Advance rental payments and refundable deposits are not covered. Recurring costs are
also excluded.

(3) MIHA/Security will cover reasonable security-related expenses for members assigned to
areas where dwellings must be modified to minimize exposure to terrorist and/or criminal
threat (receipts required). Qualifying areas and additional rules will be listed in Appendix
N of the JFTR. Examples of allowable items are security doors, bars, locks, lights, and
alarm systems. Expenditures which are not related to the physical dwelling, such as
personal security guards or dogs, are not permitted.

Receipt of MIHA/Miscellaneous will be triggered by completion of the member's initial DD Form
2367, "Individual Overseas Housing Allowance (OHA) Report." For those members who have
qualifying MIHA/Rent and/or MIHA/Security expenses, DD Form 2556, "Move-In Housing Allowance
Claim Form," must be completed.

HOW TO CLAIM MIHA

Instructions for completing DD Form 2556 and DD Form 2367 are contained in Appendix N of the
JFTR. A copy of Appendix N is included in this packet. Once completed, the form should be
submitted to the Finance Office that is responsible for processing other allowances such as travel,
transportation, and shipment of household goods. Note that the Compensation Branch does not
process travel allowances.

5. TEMPORARY LODGING ALLOWANCE (TLA)

If, upon arrival at your new duty station, you and/or your dependents must stay in temporary
lodgings (hotel/motel-type) until your permanent housing is obtained, you may receive TLA to
partially reimburse the additional expense. TLA is payable at either a full rate or a reduced rate. If
your temporary lodgings do not have kitchen facilities and you must obtain meals in public
restaurants, you may be paid TLA at the full rate. TLA will be paid at the reduced rate if you have
cooking facilities in your temporary lodgings. The maximum period for which TLA is payable is 60
days. In addition to being payable from initial arrival at a duty station OCONUS, TLA may also be
payable if you are required to occupy temporary lodgings for reasons beyond your control while
OCONUS; or immediately prior to departure from a duty station OCONUS required by PCS orders.

HOW TO CLAIM TLA

TLA will not be paid automatically. You must submit form PHS-488, "Claim for Temporary Lodging
Allowance," (included in this packet) before TLA will be paid. You must also attach to form
PHS-488 all receipts for lodging. The amount of TLA you will receive is based on the travel per
diem for the station to which you are assigned. TLA is approved in 10 day increments. A request
for TLA for more than 60 days must be approved by the Director, DCP.

If you are entitled to TLA at the full rate, you are not entitled to COLA.
6. FAMILY SEPARATION ALLOWANCE (FSA)

There are two types of FSA: FSA-I and FSA-II.

FSA-I is payable to you for added housing expenses caused by enforced separation from your dependents, making it necessary to maintain one home for dependents and another for yourself. Entitlement to FSA-I exists only when PCS orders expressly prohibit the transportation of your dependents to the new duty station. FSA-I is payable in a monthly amount equal to BAH-II payable to an officer without dependents in your same pay grade. FSA-I will not be paid if you maintain a separate household for yourself, in addition to one for your dependents, merely for your own convenience. FSA-I is not payable in Hawaii.

FSA-II is payable to compensate for added expenses incurred because of enforced separation from your family due to PCS, duty aboard a ship, or temporary duty of 30 or more consecutive days. It is payable to you CONUS and OCONUS, and may be paid concurrently with FSA-I. If entitled, you will be paid FSA-II at the monthly rate of $100.

HOW TO CLAIM FSA

You may apply for both FSA-I and FSA-II by memorandum (as shown in the sample included in this packet).

7. EDUCATION ALLOWANCE

If your dependent children are authorized to reside with you at your foreign duty station and they are enrolled in primary or secondary grades 1 through 12, you may be authorized to receive an education allowance if it has been determined that the schools in the locality of your duty station are inadequate. The amount payable is the actual cost of the schooling with a maximum as allowed by the military service having jurisdiction over the area.

HOW TO CLAIM EDUCATION ALLOWANCE

Claims for reimbursement of authorized education expenses should be submitted to the Compensation Branch, DCP, every 3 months by memorandum. See INSTRUCTION 4, “Education Allowances for Dependents of Officers Stationed in Foreign Areas,” Subchapter CC22.4 of the CCPM, for required documentation.

8. BASIC ALLOWANCE FOR HOUSING (BAH) [Alaska and Hawaii Only]

BAH is payable to members on active duty and will vary according to the grade in which serving or appointed for basic pay purposes, dependency status, and the permanent duty station assigned. A member’s old duty station is the duty station for BAH purposes from the day the member departs the old duty station through the day before the member reports to the new duty station. If the member had been residing in Government quarters at the old duty station, the member is entitled to BAH the date of termination of Government quarters. See DOD Financial Management Regulation, Volume 7A, Chapter 26 for complete details on BAH. The Web site for this information is—www.dtic.mil/comptroller/fmr/07a.

DESIGNATION OF PAYROLL ADDRESS

Prior to departure for your overseas station, you must designate an address to which you want your financial documents sent. The Compensation Branch, DCP, will continue sending your statement of earnings and other payroll documents to the address you have currently designated until you notify them to...
change it.

REMEMBER: YOU CONTROL WHERE YOU RECEIVE ALL PAYROLL DOCUMENTS. THIS ADDRESS WILL NOT BE CHANGED UNTIL YOU REQUEST IN WRITING THAT IT BE CHANGED. ANY CHANGE IN DUTY STATION ADDRESS WILL HAVE NO BEARING ON YOUR PAYROLL ADDRESS.

To change your payroll address, use the sample memorandum included in this packet.

IV. UPON ARRIVAL AT AN OVERSEAS STATION

Immediately upon arrival at your new overseas duty station, you should send a report to your sponsoring Agency/OPDIV/Program in the United States, and form PHS-2874, "Notice of Arrival - Commissioned Officers," to the Compensation Branch, DCP, announcing your safe arrival. It is recommended that you submit the necessary forms to begin correct overseas station allowances at this time, if possible. Delivery of mail from an overseas station may take several weeks. Therefore, by the time documentation of your dependency status, claim for TLA, FSA, or other allowances are received by the Compensation Branch, DCP, it may be past the deadline for that month's payroll. You would then have to wait as long as 45 days until the next pay cycle to have your pay adjusted to include your overseas allowances. Consult the checklist in this pamphlet to see what forms you should submit immediately upon arrival at your overseas duty station.

MEDICAL CARE OVERSEAS

You and your dependents retain eligibility to receive all medical, dental, and optical care from any Uniformed Services medical facilities overseas. Upon arrival, locate the nearest Uniformed Services medical facilities and learn what types of medical, dental, and optical care they routinely provide.

For the Officer: You are expected to receive all medical, dental, and optical care from Uniformed Services facilities where available. However, if Uniformed Services facilities are not available, you may obtain EMERGENCY medical, dental, and optical care (refractions only) at PHS expense from civilian sources without prior authorization. Medical treatment may be considered an emergency when, in the opinion of the attending physician, failure to provide hospitalization or treatment would result in serious impairment of health or death. Emergency dental treatment required for immediate relief of pain may be obtained by you from any available dentist.

You should pay any bills for emergency medical or dental care furnished to you by civilian health practitioners OCONUS. You should then submit a claim for reimbursement to:

Division of Commissioned Personnel
ATTN: Medical Affairs Branch/BMP
5600 Fishers Lane, Room 4C-06
Rockville, MD 20857-0001

Standard Form 1034, "Public Voucher for Purchases and Services Other Than Personal," (copy included in this packet) shall be completed in duplicate stating in the English language the amount of reimbursement due, and shall be supported by the original, dated, itemized bill specifying the diagnosis and services furnished and providing the foreign exchange rate to U.S. currency on the date of payment for services.

An explanation of the emergency shall be given on the reverse side of the voucher and a copy of the cancelled check or receipt attached. Your signature and social security number shall appear under
the explanation attesting to the fact that the services were received. The voucher shall be reviewed by a superior officer, charges converted into U.S. dollars, and countersigned by a superior officer. Forward the voucher with supporting papers to:

Division of Commissioned Personnel  
ATTN: Chief, Medical Affairs Branch  
5600 Fishers Lane, Room 4C-06  
Rockville, MD  20857-0001

For additional information about your medical benefits, see INSTRUCTION 7, Subchapter CC29.3, "Health Care Benefits; Active Duty Officers" of the CCPM and CCPM Pamphlet No. 65, "Information on Health Care Services," (available on the DCP Web site—http://dcp.psc.gov—or call a Patient Care Coordinator at 1-800-368-2777 or 301-594-6330 from 8 a.m. to 4:30 p.m. (eastern time), Monday through Friday.

Upon return to the United States for leave or official business during the period of overseas assignment, the officer should schedule medical and/or dental visits at the nearest Uniformed Services facility to obtain any routine, preventive care such as annual dental examinations and prophylaxis, booster inoculations, required physical examinations, optometry examinations, eyeglasses, supplies of prescribed medications, etc.

*For Dependents:* Your spouse and children qualify for medical treatment from Uniformed Services medical facilities on a space available basis, and continue to be eligible for benefits under TRICARE. For information on the TRICARE program, consult INSTRUCTION 4, Subchapter CC29.3 of the CCPM.

**CONTACT EMBASSY OR CONSULATE**

Make contact with the nearest American embassy or consulate in addition to establishing ties with any local U.S. Uniformed Services facilities. The personnel at these places will provide valuable information to help you find suitable housing, schools, financial institutions, shopping areas, and other community resources. They will also be familiar with any significant local customs or courtesies that you need to know. As a PHS officer, you may be serving in an area that is isolated from any U.S. Government installations or personnel. Therefore, it is essential that U.S. officials are aware of where you and your dependents are located so that you can be reached should it become necessary.

**V. SUMMARY**

Your assignment overseas may be one of the most productive and enjoyable parts of your career with PHS. This guide provides basic information that will make the transition to the overseas station easier for you and your family. Take this guide with you. Refer to it or the other sources mentioned if you have problems or need information.
**LIST OF FORMS INCLUDED IN THIS PACKET**

<table>
<thead>
<tr>
<th>Form</th>
<th>Available on Web Site</th>
<th>No. of Copies</th>
</tr>
</thead>
<tbody>
<tr>
<td>SF-1012, &quot;Travel Voucher&quot;</td>
<td><a href="http://forms.psc.gov/forms">http://forms.psc.gov/forms</a> (fillable)</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td><a href="http://gsa.gov/forms">http://gsa.gov/forms</a></td>
<td></td>
</tr>
<tr>
<td>SF-1034, &quot;Public Voucher for Purchases and Services Other Than Personal&quot;</td>
<td><a href="http://forms.psc.gov/forms">http://forms.psc.gov/forms</a> (fillable)</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td><a href="http://gsa.gov/forms">http://gsa.gov/forms</a></td>
<td></td>
</tr>
<tr>
<td>PHS-488, &quot;Claim for Temporary Lodging Allowance&quot;</td>
<td><a href="http://forms.psc.gov/forms">http://forms.psc.gov/forms</a> (fillable)</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>PHS-2874, &quot;Notice of Arrival - Commissioned Officers&quot;</td>
<td>(only available in paper format)</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>PHS-6059, &quot;Request for Overseas Station Allowances&quot;</td>
<td><a href="http://forms.psc.gov/forms">http://forms.psc.gov/forms</a> (fillable)</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>DD Form 2367, &quot;Individual Overseas Housing Allowance (OHA) Report&quot;</td>
<td>web1.whs.osd.mil/icdhome/forms.htm (fillable)</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>DD Form 2556, &quot;Move-In Housing Allowance Claim Form&quot;</td>
<td>web1.whs.osd.mil/icdhome/forms.htm (fillable)</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Appendix N of the Joint Federal Travel Regulations</td>
<td><a href="http://www.dtic.mil/perdiem">http://www.dtic.mil/perdiem</a></td>
<td>1</td>
</tr>
</tbody>
</table>
ADDRESSES AND PHONE NUMBERS FOR FURTHER INFORMATION

If this guide does not contain all the information you need and/or if you have further questions or need clarification, write or call any of the offices listed below.

FOR GENERAL PERSONNEL INFORMATION

Division of Commissioned Personnel
ATTN: Officer Support Branch
5600 Fishers Lane, Room 4-36
Rockville, MD  20857-0001
Phone: 301-594-3544
FAX: 301-594-5366

FOR INFORMATION ABOUT MEDICAL COVERAGE

Division of Commissioned Personnel
ATTN: Medical Affairs Branch
5600 Fishers Lane, Room 4C-06
Rockville, MD  20857-0001
Phone: 301-534-6330 or 1-800-368-2777
FAX: 301-594-2973 or 1-800-733-1303

FOR REPORTING MAJOR ILLNESS

Division of Commissioned Personnel
ATTN: Medical Affairs Branch
5600 Fishers Lane, Room 4C-06
Rockville, MD  20857-0001
Phone: 301-594-3297
FAX: 301-594-3299

FOR INFORMATION ABOUT HEALTH NEEDS WHILE OVERSEAS

Contact the International Health Officer in your program.

FOR INFORMATION ABOUT PAYROLL

Division of Commissioned Personnel
ATTN: Compensation Branch
5600 Fishers Lane, Room 4-50
Rockville, MD  20857-0001
Phone: 301-594-2963
FAX: 301-443-0064
CHECKLIST

Prior to Departure

1. _____ Apply for passports.
2. _____ Receive personnel orders for your new overseas station.
3. _____ Contact overseas station for information about temporary lodgings and other essential information.
4. _____ Contact shipping officer to make arrangements for shipment.
6. _____ Have physical examination and inoculations.
7. _____ Make financial arrangements.
8. _____ Prepare personal items to take with you.
9. _____ Leave forwarding address with a close relative, friend, your program, the Compensation Branch of DCP, and your financial institution.

Upon Arrival

1. _____ Notify program of safe arrival.
2. _____ Contact the nearest U.S. Government offices to inform them of your presence and the address for you and your dependents.
3. _____ Complete forms to begin overseas station allowances: PHS-6059, "Request for Overseas Station Allowances," and PHS-488, "Claim for Temporary Lodging Allowance"
4. _____ Complete travel voucher and request for Dislocation Allowance
5. _____ Notify your Agency/OPDIV/Program, Compensation Branch of DCP, and your family of your correct temporary and permanent mailing address.
6. _____ Find the nearest Uniformed Services medical facility.
INFORMATION LOG

You may wish to fill in the information on this sheet so that the information concerning your personal matters is contained in a single place that can be referred to easily.

Date of your arrival at overseas station:__________________________________________

Date of dependents arrival at overseas station:__________________________________________

Date temporary lodging procured:__________________________________________

Date temporary lodging vacated:__________________________________________

Date permanent lodging procured:__________________________________________

Date permanent lodging occupied:__________________________________________

Names and relationship to dependents living at overseas station:
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________

PERSONAL DATA LOG

Passport Number (self):

Spouse:__________________________________________________________________________

Other dependents:__________________________________________________________________________

In case of emergency, contact in the United States:

Name:__________________________________________________________________________

Address:__________________________________________________________________________

Phone:

E-Mail:__________________________________________________________________________

Fax:__________________________________________________________________________

In case of emergency, contact at Overseas Station:
# ACRONYMS

<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>BAH</td>
<td>Basic Allowance for Housing</td>
</tr>
<tr>
<td>CCPM</td>
<td>Commissioned Corps Personnel Manual</td>
</tr>
<tr>
<td>COLA</td>
<td>Cost of Living Allowance</td>
</tr>
<tr>
<td>CONUS</td>
<td>Continental United States</td>
</tr>
<tr>
<td>DCP</td>
<td>Division of Commissioned Personnel</td>
</tr>
<tr>
<td>DLA</td>
<td>Dislocation Allowance</td>
</tr>
<tr>
<td>FSA</td>
<td>Family Separation Allowance</td>
</tr>
<tr>
<td>JFTR</td>
<td>Joint Federal Travel Regulations</td>
</tr>
<tr>
<td>MIHA</td>
<td>Move-In Housing Allowance</td>
</tr>
<tr>
<td>OCONUS</td>
<td>Outside the Continental United States</td>
</tr>
<tr>
<td>OHA</td>
<td>Overseas Housing Allowance</td>
</tr>
<tr>
<td>OPDIV</td>
<td>Operating Division</td>
</tr>
<tr>
<td>PCS</td>
<td>Permanent Change of Station</td>
</tr>
<tr>
<td>PHS</td>
<td>Public Health Service</td>
</tr>
<tr>
<td>TLA</td>
<td>Temporary Lodging Allowance</td>
</tr>
</tbody>
</table>
INFORMATION ON OVERSEAS DUTY
A Guide for Commissioned Officers of the Public Health Service

SAMPLE MEMORANDA

MEMORANDUM FORMAT FOR REQUESTING FSA-I
MEMORANDUM FORMAT FOR REQUESTING FSA-II-T
MEMORANDUM FORMAT FOR REQUESTING FSA-II-R
MEMORANDUM FORMAT FOR REQUESTING FSA-II-S
MEMORANDUM FORMAT FOR DESIGNATION OF PAYROLL ADDRESS

Division of Commissioned Personnel
Program Support Center
Department of Health and Human Services
TO: Division of Commissioned Personnel
ATTN: Compensation Branch
5600 Fishers Lane, Room 4-50
Rockville, MD 20857-0001

FROM: Officer's Name
SSN: 000-00-0000
PHS No.: 00000

SUBJECT: FSA-I Allowance

The following information is submitted for family separation allowance, FSA-I, in connection with personnel order number ___________ dated ___________ which prohibited transportation of my dependents to my present duty station. I arrived at _____ (duty station) _______ on ____ (date) _______. My dependents reside at _____ (address) ______________. I will promptly notify you if:

(1) My dependents move to the area of this station or visit me for more than 3 months; or

(2) I occupy Government quarters.

/s/ Signature
MEMORANDUM FORMAT FOR REQUESTING FSA-II-T*

TO: Division of Commissioned Personnel  
ATTN: Compensation Branch  
5600 Fishers Lane, Room 4-50  
Rockville, MD 20857-0001

FROM: Officer's Name  
SSN: 000-00-0000  
PHS No.: 00000

SUBJECT: FSA-II-T

The following information is submitted for family separation allowance FSA-II-T, in connection with travel order number ____________, dated ____________, a copy of which is attached.

My temporary duty (TDY) travel itinerary was:**

Departed (permanent station) on ___(date)___  
Arrived (temporary duty station) on ___(date)___  
Departed (temporary duty station) on ___(date)___  
Arrived (permanent station) on ___(date)___

I was on leave of absence enroute to or from, or while at the temporary duty station during the following periods: (Show beginning and ending date of each period of time.)

During my absence I maintained a residence for my dependents at  
_____(address)__________ where I reside at such times as my duty assignment permits.

/s/ Signature

Attachment

* FSA-II-T: Officer on TDY away from permanent station continuously for more than 30 days and dependents do not reside at or near officer's TDY station.

** Attach copy(ies) of TDY order.
MEMORANDUM FORMAT FOR REQUESTING FSA-II-R*

TO: Division of Commissioned Personnel  
ATTN: Compensation Branch  
5600 Fishers Lane, Room 4-50  
Rockville, MD 20857-0001

FROM: Officer’s Name  
SSN: 000-00-0000  
PHS No.: 00000

SUBJECT: FSA-II-R

The following information is submitted for family separation allowance, FSA-II-R, in connection with personnel order number ____________ dated ____________ which prohibited transportation of my dependents to my present station at Government expense. I departed from my last station on ____ (date) _______ and took (number) days leave enroute to my present station. I will promptly notify you if my dependents move to the area of this station or visit at this station for more than 3 months.

/signature

* FSA-II-P: Allowance payable because of duty at permanent station where movement of officer’s dependents is not authorized, i.e., specifically precluded in the officer’s personnel order.
MEMORANDUM FORMAT FOR REQUESTING FSA-II-S*

TO: Division of Commissioned Personnel
ATTN: Compensation Branch
5600 Fishers Lane, Room 4-50
Rockville, MD 20857-0001

FROM: Officer’s Name
SSN: 000-00-0000
PHS No.: 00000

SUBJECT: FSA-II-S

The following information is submitted for family separation allowance FSA-II-S in connection with personnel order number ___________________ dated __________. I departed from ________ (port) ________ on __________ (date) ___. During my absence I maintained a residence for my dependents at ________ (address) ________ where I reside at such times as my duty assignment permits.

/s/ Signature

FSA-II-S: Officers assigned to a ship under PCS orders. Officers ordered from their permanent station to a port for temporary duty on board ship will submit applications for payment of this allowance after return to their permanent station in accordance with INSTRUCTION 5, “Family Separation Allowance,” Subchapter CC22.1 of the Commissioned Corps Personnel Manual.
MEMORANDUM FORMAT FOR DESIGNATION OF PAYROLL ADDRESS

TO: Division of Commissioned Personnel
ATTN: Compensation Branch
5600 Fishers Lane, Room 4-50
Rockville, MD 20857-0001

FROM: Officer's Name
SSN: 000-00-0000
PHS No.: 00000

SUBJECT: Payroll Designation

I hereby designate the following as the address to send my statements of earnings, bonds, and all other payroll related documents:

Street Name
Apartment Number (if any)
City, State, ZIP

/s/ Signature