



## Requisition Form Texas Wing Encampment

Requester's Name: \_\_\_\_\_

Area of Item Request:  Administration  Logistics  Medical  SET

Firearms  Communications  Mess  Public Affairs

Line Staff—Please specify \_\_\_\_\_

Item(s) Being Requested and Justification: \_\_\_\_\_

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Requester's Signature: \_\_\_\_\_

**Approved**     **Disapproved**

Commander's Signature: \_\_\_\_\_

All requests must be submitted by 1200 (noon) for the following day.



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Requester's Signature: \_\_\_\_\_

**Approved**     **Disapproved**

Commander's Signature: \_\_\_\_\_

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