SECTOR CHARLESTON

IDT CERTIFICATION SHEET:

DRILL DATE: _____ Dept ID_____

RANK	NAME	EMPLID	SCHEDULED	DRILL TYPE	DUTY PURPOSE	MEAL CODE	COMMENTS

CERTIFYING OFFICIAL SIGNATURE: I certify that this member performed training on the date(s) indicated above. I further certify in accordance with 37 U.S.C. 402(b) that this member received commuted rations while performing Inactive Duty for Training in at least eight hours on the above date(s) and that the above meals were not available to the member either from a government mess or through commercial procurement.

Signature of Certifying Official (include Name, Rank and Title) (This is the person certifying that the members above drilled)	Date:
ADMIN ENTRIES IN DA COMPLETED (Include Name, Rank): (This is person who marks drills completed once members have drilled)	Date:

Code	Purpose	Code	Purpose	Code	Purpose
*All Meals	Authorized payment for all three meals	*Lnch & Sup	Authorized payment for lunch and supper only	+Funeral	Represents the combination of an IDT Single Drill and a Funeral Honors Duty Drill performed on the same day.
*Breakfast	Authorized payment for breakfast only	*Lunch	Authorized payment for lunch only	Single	A single drill
*Brk & Lnch	Authorized payment for breakfast and lunch only	*Mess Avail	Government messing is available for authorized meals during this drill	Multiple	Two single drills performed on the same day.

Note: (1) Do not use if members are required to pay for their meals at the dinning facility. This code is only used when the meals are provided at no charge (e. g. On a vessel or other essential messing unit.). Officers not entitled to meals on IDT.

Encl (4)