

**INFORMATION FOR USAF MEDICAL LOGISTICS DIRECTORY
(For All Medical Groups/Centers and Facilities with MERCs)**

SRAN/DODAAC: _____

COMPLETE FACILITY NAME: _____
(Example: Wilford Hall USAF Med Ctr/SGL” or “5th Medical Group/SGSL”

STREET ADDRESS: _____

BASE: _____

APO CITY (AE/AP): _____ STATE OR COUNTRY: _____ ZIP: _____ - _____

MAJCOM: _____ RIC: _____ OPER BED: _____

DSN: _____ NOTE FOR DSN: _____

COMMERCIAL NUMBER (INCLUDE AREA CODE): _____

DATAFAX NUMBER (COMMERCIAL): _____

EMAIL: _____

PERSONNEL CHANGES

POSITION	NAME	E-MAIL ADDRESS	PHONE EXT
DIRECTOR, MED LOGISTICS	_____	_____	_____
MEDICAL MATERIEL MANAGER	_____	_____	_____
SUPT / NCOIC, MED LOGISITCS	_____	_____	_____
SUPT / NCOIC, MED MATERIEL	_____	_____	_____
DIRECTOR, CLIN ENGINEERING	_____	_____	_____
FACILITY MANAGER	_____	_____	_____
CHIEF MERC / MED MAINTENANCE	_____	_____	_____
SUPT / NCOIC MERC / MED MAINT	_____	_____	_____
EXCESS POINT OF CONTACT	_____	_____	_____

NOTE: Please complete all blocks of information. Signature block below must also be completed. You may:
 Mail to: AFMLO/FOA, 1423 SULTAN DRIVE, SUITE 200, FORT DETRICK, MD 21702-5006;
 Fax to: 301-619-2557;
 E-mail to: millerr@ftdetrck-ccmail.army.mil; or
 Submit changes directly from the web copy of the Medical Logistics Directory
 AFMLO Home Page Address: <http://www.medcom.amedd.army.mil/afmlo/>

SIGNATURE: _____
 (Director, Medical Logistics)

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