**HEADQUARTERS ISAF**

**CJ6**

**SPECTRUM MANAGEMENT BUREAU**

**DECLARATION**

**For justification (NAME OF CAMP OR FOB Billeting Office) that \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ is an authorized member of ISAF. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ is therefore entitled to ISAF privileges while in theater.**

**BILLETING OFFICE STAMP AND SIGNATURE**