

PASSENGER TRAVEL OFFICE CUSTOMER PET TRACKER FORM

Rcvd by PTO date:_____

EMAIL FORM TO: MCBBUTLERPTOFOSTER@USMC.MIL

Limited to two pets per family

ESTIMATED DEPARTURE DATE (Okinawa Outbound):

MEMBER'S INFORMATION:

NEXT DUTY STATION (If known as applicable):

NAME (First, Middle I., Last):

RANK:

DOB:

PHONE NUMBER:

EDIPI:

EMAIL (Personal):

EMAIL (Work):

DEPENDENT INFORMATION:

NAME (As it shows on Passport):

DOB:

PASSPORT #:

NAME (As it shows on Passport):

DOB:

PASSPORT #:

NAME (As it shows on Passport):

DOB:

PASSPORT #:

NAME (As it shows on Passport):

DOB:

PASSPORT #:

NAME (As it shows on Passport):

DOB:

PASSPORT #:

PET INFORMATION:

DOG: CAT: MALE: FEMALE: AGE: BREED (Specific Breeds, No Mixes):

KENNEL: HARD: SOFT: LENGTH (Inches): WIDTH (Inches): HEIGHT (Inches):

TOTAL WEIGHT OF KENNEL WITH PET (In Lbs):

DOG: CAT: MALE: FEMALE: AGE: BREED (Specific Breeds, No Mixes):

KENNEL: HARD: SOFT: LENGTH (Inches): WIDTH (Inches): HEIGHT (Inches):

TOTAL WEIGHT OF KENNEL WITH PET (In Lbs):

ANY ADDITIONAL INFORMATION: