

**RETURN THIS COMPLETED FORM TO THE FOLLOWING ADDRESS**  
**AFTER SECURING OFF-BASE HOUSING:**

COMMANDING GENERAL  
HOUSING REFERRAL SECT B 044  
MCB  
3250 CATLIN AVE  
QUANTICO VA 22134-5001

Rank/Name: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Name of Apartment Complex or Subdivision: \_\_\_\_\_

Rented

Purchased

Were you processed through the Housing Referral Office:

(a) Efficiently (if no, please explain) \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

(b) Courteously (if no, please explain) \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_