

**SAMURAI CAFÉ DINING FACILITY, YOKOTA AIR BASE
FLIGHT SUPPORT MEAL REQUEST FORM**

DATE SUBMITTED: 4/19/26 NAME/RANK: _____ NUMBER OF PAX/CREW: _____
 PICK-UP TIME/DATE: _____ ORG: _____ AIRCRAFT TYPE: _____
 CONFIRMED: _____ DSN: _____ AIRCRAFT TAIL No.: _____
 DEPARTURE: _____

NOTES:

- Please e-mail requests to 374fss.fsvf@us.af.mil and call 225-8870 to ensure we have RECEIVED all orders
- All meal orders must be placed at least **2 HOURS** prior to "MEAL PICK-UP TIME"
- Each meal includes choice of supplements from the "SUPPLEMENTS" list
- Meal components are subject to change, depending on availability of ingredients
- Flight meals should be consumed within 4 hours of pick-up
- The heart symbol (♥) represents a "Healthy Option"
- NIS: is Not In Stock (temporary due to global shipping constraints)
- All meals cost \$6

MEALS:

#01: <u> </u> Ham & Turkey Sub	#05: <u>NIS</u> Buffalo Chicken Wrap	#09: <u> </u> Chef Salad (w/Ranch or Italian) ♥
#02: <u> </u> Turkey & Cheese Sub	#06: Breaded Chicken Burger	#10: Chipotle Chicken Sandwich ♥
#03: Turkey & Bacon Croissant	#07: <u>NIS</u> (2ea) "Uncrustables" Sandwich	#11: <u>NIS</u> Breakfast Cereal
#04: <u> </u> Ham & Cheese Sub	#08: <u>NIS</u> (4ea) Breaded Chicken Strips	#12: Ham and Cheese Croissant

SUPPLEMENTS:

#01: Soda | Chips | Nutri-grain Bar | Apple
 #02: NIS Gatorade | Carrot & Celery Sticks | Nutri-Grain Bar | Apple
 #03: NIS Water | Hummus w/Pretzels | Granola Bar | Apple
 #04: NIS Juice | 2 Boiled Eggs | Nutri-Grain Bar | Apple

<i>INTERNAL USE ONLY</i>	
<u> </u> Chips	<u> </u> Soda
<u> </u> Multigrain Bar	<u> </u> Water
<u> </u> Granola Bar	<u> </u> Gatorade
<u> </u> Boiled Egg	<u> </u> Juice
<u> </u> Hummus	<u> </u> Veggie Sticks
<u> </u> Fruit	

TOTAL MEALS: _____

TOTAL COST: \$ _____

TOTAL SUPPLEMENTS: _____

TWCF SNACKS: _____ (amount),

TWCF BEVERAGE: _____ (amount),

<i>INTERNAL USE ONLY</i>
_____ (type)
_____ (type)

MEALS PREPARED & VERIFIED BY: _____ (print), _____ (sign)

PICKED UP & VERIFIED BY: _____ (print), _____ (sign)

FLEET REPRESENTATIVE: _____ (print), _____ (sign)

AIRCREW REPRESENTATIVE: _____ (print), _____ (sign)

NETCHEF SUBMITTED: _____ (print), _____ (sign), _____ (date)

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	RANK/LAST NAME, FIRST NAME	DoD ID (YOKOTA ESM ONLY)	MEAL NUMBER	SUPPLEMENT NUMBER	CASH
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02.					
03.					
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