



# COMMISSARY ORDER

SEE REVERSE FOR COMPLETE INSTRUCTIONS

Y	M	D

INCIDENT NAME	INCIDENT NUMBER
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1	NAME	DESCRIPTION	MAXIMUM PRICE	▼ CHECK ONE ▼				
				SUBST.		INITIALS	ORDER FILLED	
				YES	NO		YES	NO
2								
3								
4								
5								
6								
7								
8								
9								
10								
11								
12								
13								
14								
15								
16								
17								
18								
19								
20								
21								
22								
23								
24								
25								

APPROVED BY (FIRELINE)	Y	M	D	OFFICE
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**DISTRIBUTION: WHITE and CANARY** - FIRE CENTRE OR EXPENSE AUTHORITY FOR APPROVAL;  
**WHITE** - AFTER APPROVAL, SEND TO STORE FOR FILLING; **PINK** - RETAIN AT FIRELINE

## INSTRUCTIONS

Enter:

- Incident name
- Incident number
- Date order is made.

The person taking the order enters:

- Person's name
- Description of articles (size, type, etc.)
- Maximum price
- Will person ordering accept a substitution? (yes or no)
- Have person ordering initial the entry.

Use one line for each item ordered.

Prior to approving the order at the fireline, ensure that:

- The worker has earned enough to cover the cost of the items
- The items ordered are required (i.e., smoking materials, toiletry items, clothing, limited amount of reading material)
- Non-essential items should not be approved (i.e., musical instruments, radios, etc.).

Store to indicate if item has been supplied (yes or no).