



**DEPARTMENT OF THE AIR FORCE  
6TH AIR REFUELING WING (AMC)  
MACDILL AIR FORCE BASE, FLORIDA**

MEMORANDUM FOR 6 CPTS/FMF

FROM:

SUBJECT: Member Certification for Temporary BAH Increase for Tampa, FL

I certify that I have incurred higher housing cost above the BAH rate, after 13 March 2020 due to COVID-19, Tampa, FL and the following represent my current housing costs:

My current monthly BAH is \_\_\_\_\_ (from the LES)

Applicable Housing Cost Category	Previous Amount	New Amount
<b>**Monthly Rent/Mortgage</b> <i>(include taxes and insurance)</i>	\$	\$
<b>**Monthly Utilities Cost</b>	<i>This section is only required if utility costs due to COVID-19 is used as part of justification</i>	
Electricity	\$	\$
Heating	\$	\$
Water/Sewer	\$	\$
Trash Disposal	\$	\$
<b>Total Monthly Utilities Cost</b> <i>(Sum of Electricity + Heating + Water/Sewer + Trash Disposal)</i>	\$	\$
<b>Total Applicable Monthly Housing Costs</b> <i>(Sum of Monthly Rent/Mortgage + Total Monthly Utilities Cost)</i>	\$	\$

\*\*Use the "MacDill AFB Temporary BAH Increase – Application Instructions" to complete the chart above

I understand the BAH rate increase is temporary and not subject to BAH rate protection. \_\_\_\_\_ (initial)

I certify the amounts listed above to be true and correct. I understand that making a false statement or claim against the US Government is punishable by court martial and that the penalty for willfully making a false claim, or false statement in connection with a claim is a maximum fine of \$10,000 or imprisonment for 5 years, or both.

\_\_\_\_\_  
Applicant

The amounts listed above are true and correct as verified by review of supporting documents shown to me by the member.

\_\_\_\_\_  
Unit Commander