



DEPARTMENT OF THE AIR FORCE
31ST FIGHTER WING (USAF)

EXAMPLE

6 November 2020

MEMORANDUM FOR RECORD

FROM: 31 FW/CC

SUBJECT: DECLARATION OF MOVEMENT

1. In light of the current decree issued by the President of the Council of Ministers (DCPM) of the Republic of Italy, the undersigned Commanders have determined that the bearer of this memorandum, named here, TSgt JOHN SMITH (Rank/Prefix, First Name, Last Name) is a member of the 31st Fighter Wing, U.S. Air Force, works in Aviano Air Base, Italy, and is supported by the Aviano Air Base medical facilities. As such, he/she has attested to a legitimate work, health, study or other need for movement on the attached self-certification form.
2. Furthermore, in accordance with Italian law, bearers of the memorandum have been informed they are to travel directly to and from their destination and limit all social contact with others to the maximum extent possible.
3. This memorandum will remain in effect until revoked by the undersigned or until justification for travel is no longer required by an Italian national decree or regional ordinance, whichever event occurs first.
4. If further need for translation of this document is required or a need to discuss the situation arises while traveling, you may contact the 31 FW Law Enforcement Desk at 0434-30-7200 for assistance.

EXAMPLE

IL COMANDANTE
AEROPORTO "PAGLIANO e GORI"
(Col. *AArm Pil Luca CROVATTI*)

JASON E. BAILEY
Brigadier General, USAF
Commander

Attachment A: Self-Certification Form

NOTE: The Italian side of both the self-declaration form and the MFR MUST be completed. The English side exists only to show you what information is required and what you are signing.

"Return With Honor"

EXAMPLE

Attachment A

SELF-DECLARATION PURSUANT TO ART. 46 AND 47 DPRN 445/2000

The undersigned FIRST M. LAST (NAMES)
born in (Country) UNITED STATES OF AMERICA
resident in (Town) SACILE (YOUR ITALY TOWN) (Province of PN (OR) VT)
via (street & N.) VIA BEST ROAD 73 / 2 (YOUR ADDRESS)
identified by (kind of document and N. PASSPORT #12345678 (OR CAC)
(OR DL))
issued by (date & place) MONTH + YEAR / STATE OR COUNTRY THAT
ISSUED I.D.
telephone number (123) 456 - 7890

Aware of the criminal consequences provided for in the event of false statements to a public official (art. 495 of the criminal code)

DECLARATION UNDER ITS OWN RESPONSIBILITY

- To be aware of the regulatory measures to contain the contagion from COVID-19 in force today, concerning the limitations to the possibility of moving individuals within the national territory;
- To be aware of the other measures and limitations provided for by ordinance or other administrative measures adopted by the President of the Region or by the Mayor pursuant to current regulations;
- To be aware of the sanctions provided for by art. 4 of the decree-law of 25 March 2020, n. 19, and by art. 2 of the decree-law of 16 May 2020, n. 33;
- That the displacement is determined by:
 - Proven work needs;
 - Health reasons;
 - Other reasons allowed by current regulations or by the aforementioned decrees, ordinances and other measures that define the measures to prevent the spread of the infection; (specify the reason for the move):

HOME ADDRESS _____;

- That the move started from (indicate the address from which it started)

WORK ADDRESS OR HOSPITAL ADDRESS _____;

- With destination (indicate the destination address)

- _____;
- With destination (indicate the destination address)

Date, time, and place of check
Signature of the declaration

EXAMPLE

The Police Operator