

PAROLE/MANDATORY SUPERVISED RELEASE (MSR) VIOLATOR WANTED BY THE ARMED FORCES <i>(Read Privacy Advisory before completing form)</i>						1. DATE PREPARED (YYYYMMDD)			
2. TO <i>(Local, State or Federal law enforcement authority as indicated by Military Service Clemency and Parole Board)</i>			3. FROM <i>(Organization or activity and place assigned)</i>			4. DISTRIBUTION			
5. VIOLATOR IDENTIFICATION									
a. NAME <i>(Last, First, Middle Initial)</i>			b. GRADE/RANK/RATE		c. SEX				
d. RACE <i>(X one or more) (Mark "UNKNOWN" if information previously marked in prisoner's CTF.)</i>				e. ETHNICITY <i>(X one) (Mark "UNKNOWN" if information previously marked in prisoner's CTF.)</i>					
<input type="checkbox"/> AMERICAN INDIAN/ALASKA NATIVE		<input type="checkbox"/> NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER		<input type="checkbox"/> HISPANIC OR LATINO				<input type="checkbox"/> NOT HISPANIC OR LATINO	
<input type="checkbox"/> ASIAN		<input type="checkbox"/> WHITE		<input type="checkbox"/> UNKNOWN					
<input type="checkbox"/> BLACK OR AFRICAN AMERICAN		<input type="checkbox"/> UNKNOWN							
f. PLACE OF BIRTH <i>(City, State, Country)</i>			g. DATE OF BIRTH (YYYYMMDD)		h. HEIGHT	i. WEIGHT			
j. EYE COLOR <i>(X one)</i>			k. HAIR COLOR <i>(X one)</i>						
<input type="checkbox"/> BLACK	<input type="checkbox"/> GREEN	<input type="checkbox"/> VIOLET	<input type="checkbox"/> AUBURN	<input type="checkbox"/> BROWN	<input type="checkbox"/> SILVER				
<input type="checkbox"/> BLUE	<input type="checkbox"/> GRAY		<input type="checkbox"/> BLACK	<input type="checkbox"/> GRAY	<input type="checkbox"/> WHITE				
<input type="checkbox"/> BROWN	<input type="checkbox"/> HAZEL		<input type="checkbox"/> BLOND	<input type="checkbox"/> RED	<input type="checkbox"/> BALD				
l. NCIC WARRANT NUMBER		m. BRANCH OF SERVICE		n. SOCIAL SECURITY NO.		o. CITIZENSHIP	p. MARITAL STATUS		
q. MILITARY OCCUPATION			s. PERMANENT RESIDENCE ADDRESS <i>(Include ZIP Code)</i>						
r. CIVILIAN OCCUPATION									
6. CURRENT ENLISTMENT				7. ENTRY INTO CURRENT PERIOD OF SERVICE			8. ATTACH PHOTOGRAPH <i>(If available)</i>		
a. DATE (YYYYMMDD)		b. PLACE <i>(City and State)</i>		a. DATE (YYYYMMDD)		b. PLACE <i>(City and State)</i>			
9. DATE/TIME RELEASED ON PAROLE/MSR				10. DATE ORDERED RETURN TO MILITARY CONTROL (YYYYMMDD)					
a. DATE (YYYYMMDD)		b. HOUR							
11. PAROLE/MSR CONDITIONS VIOLATED				12. DATES VIOLATED PAROLE/MSR					
a. MSR (X)	b. SPECIFY CHARGE			a. FROM (YYYYMMDD)		b. TO (YYYYMMDD)			
<input type="checkbox"/> YES									
13. OPERATOR'S LICENSE				14. VEHICLE LICENSE					
a. NUMBER		b. STATE	c. EXP. DATE (YYYYMMDD)		a. PLATE NO.	b. STATE	c. EXP. DATE (YYYYMMDD)	d. TYPE	
15. VEHICLE									
a. VEHICLE IDENTIFICATION NUMBER		b. YEAR	c. MAKE		d. MODEL	e. STYLE	f. COLOR		
16. RELATIVES AND/OR PERSONS KNOWN BY VIOLATOR <i>(If more space is needed, continue in Remarks or on a separate page, making reference to this item number.)</i>									
a. NAME <i>(Last, First, Middle Initial)</i>			b. RELATIONSHIP		c. ADDRESS <i>(Include ZIP Code)</i>				
(1)									
(2)									
(3)									
(4)									
(5)									

17. CERTIFICATION

The undersigned states: That as the Chair/President, or designee, of the _____ (Military Department) Clemency and Parole Board, and in the performance of official duties imposed by 10 U.S.C. 952, Department of Defense Instruction 1325.07, "Administration of Military Correctional Facilities and Clemency and Parole Authority", and _____ (Regulation of the Military Department), the Board conducted an investigation into the status of _____ (name and rank of supervision violator), a member of the United States Armed Forces serving a sentence to confinement in accordance with United States Code, Title 10, Chapter 47, by examining reports from and by questioning the service member's supervising U.S. Probation Officer and by examining and verifying the service records of said service member relating to the member's alleged parole violations. Based on the aforesaid investigation, the undersigned has personal knowledge that _____ (name and rank of supervision violator), did, knowingly violate conditions of the member's community supervision, having been originally placed on community supervision from _____ (see Item 3 above).

On _____ (date - YYYYMMDD) the Military Department's Clemency and Parole Board ordered _____ (name and rank of supervision violator) back to military control.

I state under penalty of perjury that the foregoing is true and correct. Executed on _____ (date - YYYYMMDD).

a. TYPED NAME (Last, First, Middle Initial)	b. RANK/GRADE	c. TITLE	
d. ORGANIZATION AND INSTALLATION	e. SIGNATURE (All copies)		f. DATE SIGNED (YYYYMMDD)

19. REMARKS (List peculiar habits and traits of character; unusual mannerisms and speech; peculiarities in appearance; clothing worn; aliases (names); marks and scars; tattoos; facial characteristics; complexion, posture; build, other SSN's used by individual; or other data that may assist in identification.

PRIVACY ADVISORY

Disclosure of this information is voluntary and will be used to provide information to local, state, and/or federal law enforcement officials on parole violators wanted by the Armed Forces. For additional information, see System of Records Notice, A0190-47 DAPM-ACC, "Army Corrections System and Parole Board Records," NM01650-1, "Individual Confinement Records," and F031 AF SF A, "Correction and Rehabilitation Records" published at <https://dpcl.d.defense.gov/Privacy/SORNs/>. When completed, this form contains personally identifiable information and is protected by the Privacy Act of 1974, as amended.

INFORMATION**1. AUTHORITY TO APPREHEND.**

a. Any civil officer having the authority to apprehend offenders under the laws of the United States, or of a State, territory, commonwealth, possession, or the District of Columbia may summarily apprehend parole violators from the Armed Forces of the United States and deliver them into custody of military officials. Receipt of this form and a corresponding entry in the FBI's NCIC Wanted Person File, or oral notification from military officials or Federal law enforcement officials that the person has been declared a parole violator and that his/her return to military control is desired, is authority for apprehension.

b. Civil authorities may apprehend parole violators when requested to do so by military authorities.

2. PAYMENT OF REWARD OR REIMBURSEMENT FOR EXPENSES.

a. Rewards. Receipt of this form, or oral or written notification from military authorities or Federal law enforcement officials, prior to apprehension of the individual, that the person is a parole violator and that his/her return to military control is desired will be considered as an offer of reward. Persons or agency representatives (except salaried officers or employees of the Federal Government or servicemembers) apprehending or delivering parole violators to military control are authorized:

- (1) Payment for apprehension and detention of parole violators until military authorities assume custody; or
- (2) Payment for apprehension and delivery of parole violators to a military installation.

b. Reimbursement for Expenses. Reimbursement may be made for actual expenses incurred when conditions for payment of a reward cannot be met. If two or more persons perform these services, payment will be made jointly or severally, but total payment to all may not exceed prescribed limitations.

c. Payment. Payment will be made to the person or agency representative actually making arrest and detention or delivery by the disbursing officer servicing the military facility to which the parole violator is delivered and will be in full satisfaction of all expenses of apprehending, keeping and delivering the parole violator. Payment may be made whether the parole violator surrenders or is apprehended. Payment will not be made for information leading to apprehension, nor for apprehension not followed by return to military control. Both reward and reimbursement may not be paid for the same apprehension and detention or delivery.

3. INDIVIDUAL CLAIMS HE/SHE HAS NOT VIOLATED PAROLE.

When a detained individual claims that he/she is not a parole violator and does not have the papers to prove his/her claim, the apprehending person or agency representative should communicate directly by the most rapid means available, with the nearest military installation manned by active duty personnel. When necessary, communicate directly (telephone or telegraph) with the Parole Section of the military service concerned.

a. US Army: Army Clemency and Parole Board
251 18th Street, South
Arlington, VA 22202

Telephone: (703) 571-0532/0537

b. US Navy: Commander
Navy Personnel Command
(PERS-00D)
5720 Integrity Drive
Millington, TN 38055

Telephone collect: (901) 874-4444

c. US Marine Corps: Naval Clemency & Parole Board
(Primary) 720 Kennon Street SE Suite 322
Washington Navy Yard
Washington, DC 20374-5023

Telephone collect: Area Code (202) 685-6338

(Secondary) HQMC Corrections
Deserter Information Point
701 South Courthouse Rd Suite 2000
Arlington, VA 22204-2478

Telephone collect: Area Code (703) 604-0395/3667

d. US Air Force: AF Security Forces Center (AFSFC)
1517 Billy Mitchell Blvd., Bldg. 954
Lackland AFB, TX 78236-0119

Telephone collect: Area Code (210) 501-2908 (or toll free: 1-877-273-3098), ask to be connected to 210-501-2908.