



Security

**SECURITY FORCES ADMINISTRATION AND  
REPORTS**

**COMPLIANCE WITH THIS PUBLICATION IS MANDATORY**

---

**NOTICE:** This publication is available digitally on the AFDPO WWW site at:  
<http://afpubs.hq.af.mil>.

---

OPR: HQ AFSFC/SFOP  
(SMSgt Walter Filipiak)

Certified by: HQ USAF/XOF  
(Brig Gen James M. Shames)

Pages: 84

Distribution: F

---

This manual implements Air Force Policy Directive (AFPD) 31-2, *Law Enforcement*. It provides guidance on common forms used by security forces personnel and gives instructions on how these forms are to be accomplished. The manual also provides guidance for the Security Forces Reports and Administration Branch.

<b>Chapter 1— SECURITY FORCES FORMS</b>	<b>5</b>
1.1. AF Form 52, Evidence Tag .....	5
1.2. AF Form 53, Security Forces Desk Blotter. ....	7
1.3. AF Form 75, Visitor/Vehicle Pass. ....	7
1.4. AF Form 1109, Visitor Register Log. ....	7
1.5. AF Form 1168, Statement of Suspect/Witness/Complainant. ....	8
1.6. AF Form 1176, Authority to Search and Seize. ....	11
1.7. AF Form 1199 Series, USAF Restricted Area Badges. ....	11
1.8. AF Form 1361, Pick-Up/Restriction Order. ....	12
1.9. AF Form 1364, Consent for Search and Seizure .....	12
1.10. AF Form 3226, Authority to Apprehend in Private Dwelling - Resident .....	13
1.11. AF Form 3545, Incident Report .....	13
1.12. DD Form 460, Provisional Pass .....	26
1.13. DD Form 1408, Armed Forces Traffic Ticket: .....	27
1.14. AF Form 3907, Security Forces Field Interview Data. ....	30

1.15. DD Form 1805, United States District Court Violation Notice: ..... 30

1.16. DD Form 1920, Alcoholic Influence Report. .... 31

1.17. DD Form 2701, Initial Information for Victims and Witnesses of Crime. .... 34

1.18. DD Form 2708, Receipt for Inmate or Detained Person. .... 34

**Chapter 2— SECURITY FORCES REPORTS AND ANALYSIS 35**

2.1. Processing the DD Form 1408. .... 35

2.2. Processing the DD Form 1805. .... 35

2.3. Processing Reports. .... 36

2.4. Forwarding/Disposition of Driving Records. .... 38

2.5. Parking Warden Program. .... 38

2.6. Preparation of DUI/DWI, No Proof of Insurance or Revocation/Suspension  
of Base Driving Privileges Packages. .... 38

2.7. Notifying State Licensing Offices. .... 39

2.8. Preparation of Revocation of Exchange/Commissary Privileges Packages. .... 39

2.9. Certified Mail Procedures. .... 39

2.10. Preparing Packages for Filing. .... 40

2.11. Requests for Information. .... 40

2.12. Privacy Act Considerations. .... 41

2.13. Release of Information Where the Government is a Party. .... 41

2.14. Freedom of Information Act (FOIA) Requests. .... 41

2.15. Conducting Local Records Checks. .... 42

2.16. Tracking Reports and Statistics. .... 42

2.17. Forwarding/Purging of Driving/Criminal Records. .... 42

2.18. Preparation of Barmen Letter and Distribution of Barmen/Revocation Lists. .... 42

2.19. Administrative Hold Listing. .... 42

2.20. Destruction of Material. .... 43

2.21. Disposition of Files from Active to Inactive and Staging. .... 43

2.22. Disposition of Barmen, AAFES & Driving Revocation Packages. .... 43

**Chapter 3— SECURITY FORCES MANAGEMENT INFORMATION SYSTEM (SFMIS)  
AND THE DEFENSE INCIDENT-BASED REPORTING SYSTEM (DIBRS) 44**

3.1. Security Forces Management Information System (SFMIS) ..... 44

3.2. Defense Incident-Based Reporting System (DIBRS). .... 44

<b>AFMAN31-201V7 21 JANUARY 2002</b>	<b>3</b>
<b>Attachment 1— GLOSSARY OF REFERENCES AND SUPPORTING INFORMATION</b>	<b>45</b>
<b>Attachment 2— AF FORM 52, EVIDENCE TAG, FRONT</b>	<b>47</b>
<b>Attachment 3— AF FORM 52, EVIDENCE TAG, CHAIN OF CUSTODY RECEIPT</b>	<b>48</b>
<b>Attachment 4— AF FORM 52, EVIDENCE TAG, RETURN OF PROPERTY RECEIPT</b>	<b>49</b>
<b>Attachment 5— AF FORM 53, SECURITY FORCES DESK BLOTTER, FRONT</b>	<b>50</b>
<b>Attachment 6— AF FORM 53, SECURITY FORCES DESK BLOTTER, REVERSE</b>	<b>51</b>
<b>Attachment 7— AF FORM 75, VISITOR/VEHICLE PASS, FRONT</b>	<b>52</b>
<b>Attachment 8— AF FORM 75, VISITOR/VEHICLE PASS, REVERSE</b>	<b>53</b>
<b>Attachment 9— AF FORM 1109, VISITOR REGISTER LOG</b>	<b>54</b>
<b>Attachment 10— AF FORM 1168, STATEMENT OF SUSPECT/WITNESS/ COMPLAINANT, FRONT</b>	<b>55</b>
<b>Attachment 11— AF FORM 1168, STATEMENT OF SUSPECT/WITNESS/ COMPLAINANT, REVERSE</b>	<b>56</b>
<b>Attachment 12— AF FORM 1176, AUTHORITY TO SEARCH AND SEIZE</b>	<b>57</b>
<b>Attachment 13— PROBABLE CAUSE STATEMENT</b>	<b>58</b>
<b>Attachment 14— AF FORM 1361, PICK UP/RESTRICTION ORDER</b>	<b>59</b>
<b>Attachment 15— AF FORM 1364, CONSENT FOR SEARCH AND SEIZURE</b>	<b>60</b>
<b>Attachment 16— AF FORM 3226, AUTHORITY TO APPREHEND IN PRIVATE DWELLING</b>	<b>61</b>
<b>Attachment 17— AF FORM 3545, INCIDENT REPORT, PAGE 1</b>	<b>62</b>
<b>Attachment 18— AF FORM 3545, INCIDENT REPORT, PAGE 2</b>	<b>63</b>
<b>Attachment 19— AF FORM 3545, INCIDENT REPORT, PAGE 3</b>	<b>64</b>
<b>Attachment 20— AF FORM 3545, INCIDENT REPORT, PAGE 4</b>	<b>65</b>
<b>Attachment 21— AF FORM 3545, INCIDENT REPORT, PAGE 5</b>	<b>66</b>
<b>Attachment 22— AF FORM 3545, INCIDENT REPORT, PAGE 6</b>	<b>67</b>

<b>Attachment 23— AF FORM 3907, SECURITY FORCES FIELD INTERVIEW DATA</b>	<b>68</b>
<b>Attachment 24— DD FORM 460, PROVISIONAL PASS</b>	<b>69</b>
<b>Attachment 25— DD FORM 1408, ARMED FORCES TRAFFIC TICKET, WHITE COPY FRONT</b>	<b>70</b>
<b>Attachment 26— DD FORM 1408, ARMED FORCES TRAFFIC TICKET, YELLOW COPY REVERSE</b>	<b>71</b>
<b>Attachment 27— DD FORM 1408, ARMED FORCES TRAFFIC TICKET, PINK COPY REVERSE</b>	<b>72</b>
<b>Attachment 28— DD FORM 1408, ARMED FORCES TRAFFIC TICKET, BACK OF COPY 1</b>	<b>73</b>
<b>Attachment 29— DD FORM 1805, UNITED STATES DISTRICT COURT VIOLATION NOTICE, FRONT</b>	<b>74</b>
<b>Attachment 30— DD FORM 1805, UNITED STATES DISTRICT COURT VIOLATION NOTICE, REVERSE</b>	<b>75</b>
<b>Attachment 31— DD FORM 1920, ALCOHOLIC INFLUENCE REPORT, FRONT</b>	<b>76</b>
<b>Attachment 32— DD FORM 1920, ALCOHOLIC INFLUENCE REPORT, REVERSE</b>	<b>77</b>
<b>Attachment 33— DD FORM 2701, INITIAL INFORMATION FOR VICTIMS AND WITNESSES OF CRIME, FRONT</b>	<b>78</b>
<b>Attachment 34— DD FORM 2701, INITIAL INFORMATION FOR VICTIMS AND WITNESSES OF CRIME, REVERSE</b>	<b>79</b>
<b>Attachment 35— DD FORM 2708, RECEIPT FOR INMATE OR DETAINED PERSON</b>	<b>80</b>
<b>Attachment 36— SAMPLE FORMAT FOR A BARMENT LETTER</b>	<b>81</b>
<b>Attachment 37— DRIVER'S LICENSE INFORMATION</b>	<b>84</b>

## CHAPTER 1

### SECURITY FORCES FORMS

**1.1. AF Form 52, Evidence Tag .** Use this form to record receipt or seizure of evidence or other acquired property. Proper completion of the AF Form 52 ensures a proper chain of custody of evidence for legal proceedings.

1.1.1. Use AF Form 52 to record evidential or acquired property transactions. Proper completion of this form ensures proper chain of custody of evidence for legal proceedings and provides an accurate record of acquired property. The form is two hard stock manila cards separated by a piece of carbon paper. The front sides of both copies are printed with the same information. The back side of the first copy contains the chain-of-custody and the back side of the second copy contains final disposition blocks. One AF Form 52 may be accomplished on each item or several items may be recorded on one form. Examples: One marijuana cigarette found on the back seat of an automobile would require one form, while four marijuana cigarettes found in the glove compartment of the same automobile could be placed in a single evidence bag and one form could be completed. The decision to use one form per item or to record several items per form is a decision based on the circumstances of the acquisition. To provide a record or receipt for the property, the property custodian uses permanently bound logbooks, one for evidence and the other for acquired property. The property custodian is usually an investigator in the investigations section. They will log the evidence or acquired property in when they receive it. This procedure will maintain the chain-of-custody. When property is returned to the owner or otherwise disposed of, the person receiving or destroying the property will sign the AF Form 52, which will be retained in the security forces administration file. When used to record receipt of evidence or acquired property, the first copy of the form is affixed to the item and is used to include any future entries to ensure chain of custody.

1.1.2. Filling out the front of the AF Form 52 ([Attachment 2](#)).

1.1.2.1. Date: The date the tag is completed.

1.1.2.2. Tag No.: Each AF Form 52 is considered a tag. If a security forces member fills out one AF Form 52, they'll write 1 of 1. If two tags, the first tag would be 1 of 2 and on the second one, 2 of 2.

1.1.2.3. Case File No.: Leave blank. It will be filled in by the property custodian when a case number is obtained.

1.1.2.4. AF Base or Det/Bin No.: Write in the base name where the property was obtained.

1.1.2.5. Log Page: Leave blank. The property custodian will fill in when the property is logged into the property log book.

1.1.2.6. On (date): Date the property was obtained.

1.1.2.7. At (place): The general location where the property was obtained, e.g. Bldg 10215, room 103 or a 1997 blue Ford Pick-up, TX plate VVT986, etc.

1.1.2.8. The property described: Circle the applicable action, then explain the specific location where the security forces member obtained the property, e.g. top drawer of dresser in master bedroom or under front passenger seat, etc.

1.1.2.9. Description: Provide a full, detailed description of the property, to include claimed value if the item is to be returned. Use the following method to describe items:

1.1.2.9.1. Quantity (How many)

1.1.2.9.2. Item (Common name)

1.1.2.9.3. Color (Include multiple colors)

1.1.2.9.4. Construction (What the item appears to be made of)

1.1.2.9.5. Identifying features (Serial numbers, UPC codes, brand names, etc.)

1.1.2.9.6. Size (Length, width, height, depth, thickness, volume)

1.1.2.9.7. Visible condition (Soiled, broken, scratched, torn)

1.1.2.9.8. I.D. markings and containerizing (Placed in a paper bag, sealed with evidence tape and marked for I.D.: Initials, date and time, across the seal and bag). Right after the last written word draw a line to the right margin and write "Last Item" in between the line. Example:( ...seal and bag. \_\_\_\_\_ Last Item \_\_\_\_\_ )

1.1.2.9.9. At the end of this block, include a statement about how, when and where the property was acquired.

1.1.2.9.10. Signature of witness: This is for the signature of the person who actually witnessed the acquisition of the items, not the person who witnessed the form being filled-out.

1.1.2.9.11. Signature of person receiving property: This is the signature of the person who collected or obtained the property. The chain-of-custody for the item is initiated here.

1.1.3. Filling out the AF Form 52, back of first copy, Chain-of-Custody Receipt (**Attachment 3**)

1.1.3.1. Released by: Print name, sign name and date. The only person who can release the property in this first block is the person who signed block 11.

1.1.3.2. Purpose: Why was the property released? Released to Desk Sgt, SFOI or returned to owner, etc.

1.1.3.3. Condition: Was the property new, used, unopened, torn, etc?

1.1.3.4. Received by: Print name, sign name and date of person who the security forces member released the property too. Now, this person is the only one who can sign releasing the property in the next released by block.

1.1.4. AF Form 52, Evidence Tag, back of second copy, Return of Property Receipt (**Attachment 4**)

1.1.4.1. The second copy of the form is given to the person relinquishing possession of the property. The reverse side is where security forces document release of property to the proper owner or final disposition of it. However, if the evidential or acquired property was contraband, the property will not be returned and the remarks section will indicate disposal actions. The disposal of all evidence will be coordinated with the SJA prior to disposal.

1.1.5. When property is returned to the owner or otherwise disposed of, the person receiving the property signs the AF Form 52, which is retained in the security forces file according to AFMAN 37-139, *Records Disposition Schedule*.

**1.2. AF Form 53, Security Forces Desk Blotter.** The security forces controller prepares this form as the official chronological record of security forces activities. Installations with more than one security forces control center, each must complete separate blotters. Completed AF Forms 53 should include sufficient information to identify persons concerned, to fix the time, facts and circumstances of incidents and to provide a complete summary of events for the tour of each flight. The form will be initiated at the beginning and terminate at the closing of each tour of duty. The following information is provided for completing the AF Form 53.

1.2.1. Ensure sufficient information is included in each entry and those entries are maintained in a chronological order. ([Attachment 5](#))

1.2.2. Ensure required information is included on the reverse side of the original copy. ([Attachment 6](#))

1.2.3. Blotters will be maintained IAW AFMAN 37-139, *Records Disposition Schedule*. Blotters can be kept electronically or paper copy. If filed electronically, MAJCOMS/local installations will develop a system to ensure the blotters are being reviewed by the Flight Leader/Flight Sergeant.

1.2.4. Prepare sufficient copies to satisfy local requirements; however, distribution must be limited to only those personnel who have a valid daily requirement to monitor it, that is, the Wing Commander, the local Air Force Office of Special Investigations (AFOSI) and the Staff Judge Advocate or as determined by the Installation Commander. At no time should the blotter be distributed below group level. Unit first sergeants and commanders receive notifications involving personnel within their unit.

**1.3. AF Form 75, Visitor/Vehicle Pass.** Use the AF Form 75 to control visitors and vehicles entering an Air Force installation on a temporary basis. This form is completed in two copies. Give the original (1st copy) to the individual and file the second copy. Computer generated products may be used. Procedures for completing the form are as follows: ([Attachment 7](#) & [Attachment 8](#))

1.3.1. Base: Self-Explanatory

1.3.2. Name of Visitor, Driver and Street Address or Firm: Put in full name of the visitor and home address. If a vendor, put in full name and name of firm they represent and address.

1.3.3. Sponsor or Organization/Name: Rank and name of person or organization sponsoring the individual onto the installation. This is important because they are responsible for the visitors actions while on the installation.

1.3.4. Phone Number: Self-explanatory

1.3.5. Total Number in Party: Put in the total number of visitors including the individual obtaining the pass. If local requirements dictate, print other visitor's names on the reverse of the form.

1.3.6. Time and Date Issued: Self-explanatory

1.3.7. Issuing Official: Print rank and last name of the individual who issued the pass along with flight assignment.

1.3.8. Visitor and Vehicle passes will be maintained in accordance with AFMAN 37-139, *Records Disposition Schedule*.

**1.4. AF Form 1109, Visitor Register Log.** The form is self-explanatory and should be prepared in one copy. It is maintained at any installation, office, controlled or restricted area where visitors must be registered. Completed forms will be maintained for 90 calendar days from the last entry made. ([Attachment 9](#))

1.4.1. Procedures for completing the form are as follows:

1.4.2. Year, Month, Day: Self-explanatory

1.4.3. Organization: Organization using the form.

1.4.4. Location: Specific Area and installation.

1.4.5. Name, Grade, Organization or Firm: Full name, grade and organization of the visitor.

1.4.6. Signature of Escort and Badge Number: Signature and badge number of person escorting. If no badge is used for the area, put "N/A" in the badge number column.

**1.5. AF Form 1168, Statement of Suspect/Witness/Complainant.** This form is to be used when taking a written statement from a suspect, accused person, witness or complainant (military or civilian). When the statement is handwritten, the writer initials the end of each paragraph, any errors and signs the statement. If the writer needs a continuation sheet, use plain bond paper. Using the back of the form for the actual statement is optional. As a minimum, mark the document "For Official Use Only." Sufficient copies should be prepared to satisfy local requirements. The form is divided into six sections. The following information is provided for completing the AF Form 1168:

1.5.1. Filling out sections I & II, Statement Information & Personal Identification. Ensure the statement and personal information are completely filled out prior to rights advisement or statement. Ensure each block, applicable to the circumstances, has an entry. Often times, when a block is left blank, the security forces controller will send it back to the person making the statement to obtain the information needed. Get all the information the first time. Use [Attachment 10](#) and [Attachment 11](#) to assist in filling out the form.

1.5.1.1. Suspect or Witness/Complainant: Place an "X" in the applicable box.

1.5.1.2. Date and Time: The date and time the statement is taken.

1.5.1.3. Location and installation: The specific location and installation where the statement is taken.

1.5.1.4. Unit taking statement: Self-explanatory.

1.5.1.5. Repeat: If it is known to be a repeat offense or complaint, place an "X" in the applicable box. If not known, leave it blank.

1.5.2. Personal Identification Section:

1.5.2.1. Name and SSN: Self-explanatory

1.5.2.2. Status/Grade: AD/E8/SMSGt, AFRC/O2/Lt, etc.

1.5.2.3. Local Address: Self-explanatory. If TDY, put TDY unit, if PCS enroute, put gaining unit.

1.5.2.4. Date and place of birth: Self-explanatory. Put city and state of birth place

1.5.2.5. Telephone: Home and duty phones.

1.5.2.6. Permanent Address or Home of Record: Not always the same as local address. If person is TDY, put the individual's home unit. For home of record, put the state where the person enlisted or was commissioned.

1.5.2.7. Military Organization/Employer: Self-explanatory.

1.5.2.8. DEROS: Applicable to overseas personnel only. Put month and year of individual's scheduled departure.

1.5.2.9. Sponsor Information: If the person giving a statement is a family member, the sponsor's information will be annotated in these blocks. If the person is a visitor, put in the name of the individual sponsoring them onto the installation.

1.5.3. Section III, Acknowledgment of Offense(s) and 5th Amendment/Article 31 Rights Advisement (suspect only). The Acknowledgment of Offenses and Rights Advisement sections apply to suspects and accused persons only.

1.5.3.1. I have been advised: List the specific offense(s) and have the suspect initial before and after the offense(s), Example: WBF//Theft of Government Property//WBF

1.5.3.2. Advised By: Full name and rank of individual who will be doing the rights advisement. Name of the SF advising the suspect of his/her rights.

1.5.3.3. Individual Identified Himself/Herself As: Put in appropriate title. Example: security forces member, security forces investigator.

1.5.3.4. Rights Advisement: Read aloud each applicable right to the suspect and ask them whether or not they understand. This is done for each right and only a "yes" or "no" answer is acceptable. The suspect initials each right as the security forces member proceeds. When reading the section "MILITARY ONLY" or "CIVILIAN ONLY", line through the one that is not applicable and have them initial at the beginning and end of the appropriate statement.

1.5.3.5. Once they have acknowledged and understand their rights, they must make a selection in reference to wanting a lawyer or not and making a statement. The suspect makes their selection by initialing adjacent to the statement of their choice. A security forces member cannot decide for, nor advise the suspect on what choice to make. If the suspect refuses to acknowledge his or her rights, do not question them. If the suspect requests a lawyer, security forces member cannot ask any further questions. If the individual states he or she wants a lawyer and then changes their mind, contact SJA for further guidance.

1.5.3.6. Signature of Suspect: Once rights are advised, whether or not they want a lawyer, the individual should sign acknowledging their rights were advised to them and they understood. If individual refuses to sign, annotate the refusal in a security force member's statement and leave the block blank.

1.5.3.7. Signature of Witness/Interviewer: This should be the same person who advised the person of their rights. He/she is acknowledging explanation of rights to the suspect.

1.5.3.8. If the individual requests a lawyer or does not wish to make a written statement, place a one (1) in the "page 1 of \_\_\_\_ pages" section. If the individual does wish to make a statement, fill in the appropriate number to reflect the total pages. Then have the individual initial the number written.

1.5.4. Section IV, Statement: The security forces member is responsible for taking a statement from a Suspect/Witness/Complainant/Victim and ensures the statement answers the six basic questions; (Who, What, When, Where, Why and How). These basic questions may have to be answered several times throughout the statement. They must ensure the entire sequence of events is written in detail in the statement. If the individual does not fully answer all the questions, the security forces member may ask the individual to clarify a point and then have the answer written in the statement. Statements may also be typed by the security forces member. Once the security forces member reviews the statement and determines all pertinent information is addressed, close out the form. The security forces member is responsible for instructing the individual on how to complete the form. Have the individual tell a story from the beginning to the end. Ensure the individual writes from margin to margin, leaving minimal space between each line. Instruct the individual that if they make an error, line through it (one line) and initial the error. Statements will be completed in ink. If additional space is needed, continue on bond paper. See Section VI on the form for instructions. This section is used to record the individual's statement.

1.5.4.1. If the individual is unable to write for some reason (e.g.: hand broken, arthritis, etc) the security forces member may write the statement for the individual. The first line in the statement must indicate the statement was written for "put in suspect/subjects name" by "your name and rank." Write exactly what they say. Regardless of who writes the statement, the subject/suspect is required to initial all corrections.

1.5.4.2. If the security forces member wishes to accomplish a question and answer statement, he/she will write the question, then the individual will write their answer. If the individual is unable to write the answer as specified in Par 1.5.4.1. above, the security forces member may write the answer as long as the statement is annotated as such. Upon completing the statement in this fashion, the individual will initial at the beginning and end of each question and answer.

1.5.4.3. Once the statement is completed, write "///End of Statement///" immediately after the last line of text. The individual will then initial at the beginning of the statement, the end of the statement and at each set of slash marks. In addition to these initials, the individual must initial any corrections or changes.

#### 1.5.5. Section V, Signature/Oath.

1.5.5.1. *I hereby voluntarily...: Have the individual read aloud the paragraph and initial after it. The SF administering the oath should ask the individual "Do you swear or affirm the statement you have given is true and correct to the best of your knowledge?"*

1.5.5.2. *Signature of Person Making Statement: Ensure the person swearing to the statement signs the form only after being administered the oath.*

1.5.5.3. *Signature of Witness/Interviewer: The interviewer should sign.*

1.5.5.4. *Date: Self-explanatory.*

1.5.5.5. *Signature of person administering Oath: Self-explanatory.*

1.5.5.6. *Page Numbers: Fill in page numbers when the statement is complete. Example: If a statement has 3 pages, page 1 would be 1 of 3, page 2, 2 of 3 and page 3, 3 of 3. The individual giving the statement will initial below all written in page numbers.*

1.5.6. Section VI, Instructions for continuation pages. Use bond paper for continuation sheets. The bottom of the reverse side of the AF Form 1168 gives continuation page instructions.

1.5.7. Once completed, statements are attached to the report for which they were taken. If a statement was taken and no report was accomplished, the statement is sent to the Reports and Analysis Section for filing. All statements are retained for a three (3) year period.

**1.6. AF Form 1176, Authority to Search and Seize.** A search is an examination of a person, property or premises to uncover evidence of a crime or to uncover evidence of a criminal intent, such as stolen goods, burglary tools, weapons or other evidence. A seizure is the taking of such items by authorities for evidence at a courts-martial or trial. To ensure the search and seizure is legal and any evidence found is admissible at a courts-martial, AF Form 1176 is used to obtain authorization for a search and seizure. This form is prepared for the signature of the commander having search authority over a specific area, property or person to be searched. The commander may give verbal authority to search only after a probable cause briefing to him/her is accomplished and the situation warrants immediate search. The commander must sign the AF Form 1176 ([Attachment 12](#)) as soon as possible after oral authorization. Once the form is signed, the security forces retain and place it into the case file. Copies are made and forwarded based on local requirements. A search authorization is not a search warrant. Search warrants are an authority to search issued by civilian authorities only.

1.6.1. Requesting SF's name and rank goes on the first line.

1.6.2. List offense(s) on the second line. A third line may be required if multiple charges exist.

1.6.3. The suspect's name and rank is listed on the fourth line.

1.6.4. The location to be searched is listed on the fifth line. Be specific.

1.6.5. List exactly what is being sought on the sixth line. Be specific.

1.6.6. Read the paragraph and line out what does not apply to the specific situation.

1.6.7. After the paragraph put the requesting SF members' name and rank.

1.6.8. Read and place an "X" in the appropriate box and circle (person) or (premise) as appropriate.

1.6.9. The date authority is granted: Self-explanatory

1.6.10. Date, time and location of granted authority: Self-explanatory

1.6.11. Typed name, grade, organization and signature of authorizing official: Self-explanatory

1.6.12. On the reverse side of the form, write or type a Probable Cause Statement outlining the reasons the security forces member believes potential evidence is at a particular place where search authority is desired. The statement should be written or typed on the back of the AF Form 1176 or on a sheet of bond paper prior to contacting the authorizing commander. The probable cause statement should be written/typed exactly as given to the commander. If the commander asks any further questions after being read the probable cause statement, the questions asked and the security force member's response should be included. This may be used as evidence at a later courts-martial to verify the probable cause for the commander issuing the authority to search. ([Attachment 13](#))

**1.7. AF Form 1199 Series, USAF Restricted Area Badges.** The USAF Restricted Area Badge is issued to each person who is granted unescorted entry authority for a restricted area. The forms are serial num-

bered, accountable and supplies must be kept secured. The forms are self-explanatory and normally issued by a Pass and Registration Section. Refer to AFI 31-101, The Air Force Installation Security Program for additional guidance on these forms.

**1.7.1. AF Form 1199, Air Force Entry Control Card (Blue)** . This form obtained through PDO, has two parts. **AF Form 1199-1, USAF Entry Control Credential, Front Label** and **AF Form 1199-2, USAF Entry Control Credential, Pressure Sensitive Label**.

**1.7.2. AF Form 1199A, USAF Restricted Area Badge (Green)** .

**1.7.3. AF Form 1199B, USAF Restricted Area Badge (Pink)** .

**1.7.4. AF Form 1199C, USAF Restricted Area Badge (Yellow)**

**1.7.5. AF Form 1199D, USAF Restricted Area Badge (Blue)** .

**1.7.6. AF Form 1199, Computer Generated**

**1.8. AF Form 1361, Pick-Up/Restriction Order.** This form is used to record facts and provide security forces with information about pick-up or restrictions on members of the military services. The security forces controller usually is responsible for completing the form. Filling out the form is self-explanatory. In the remarks section, put a brief statement why the individual is restricted or required to be picked up. ([Attachment 14](#))

1.8.1. Make sufficient copies to post with all posts/patrols. Maintain the original file at the Security Forces Control Center.

1.8.2. When cancelled. Fill out the bottom blocks of the original form and file with the case file. Ensure copies posted have been destroyed. If there is no case file, forward to Reports and Analysis Section for filing.

**1.9. AF Form 1364, Consent for Search and Seizure** . This form is used in the same manner as the AF Form 1176, except the individual freely and voluntarily consents to a search of their person, area under their control or personal possessions. Use this form to obtain the consent in writing. Also, ensure the suspect and witnesses to the consent sign the appropriate blocks on the form. When an AF Form 1364 is not available, document the consent on a plain piece of paper as long as the individual signs it and it contains the time, date, persons and place(s) to be searched. Ensure the person giving consent reads and fully understands that anything found in the search can be used against them in a criminal trial or other judicial or administrative proceedings. Inform the individual that if they do not consent to a search, the security forces member cannot conduct a search without consent, authorization, warrant or other authorization recognized by law. Prepare this form only in one copy and then retain it with the case file. ([Attachment 15](#))

1.9.1. Name, grade, SSAN and address/organization of the person granting consent.

1.9.2. Rank and name of consenting person.

1.9.3. Rank, name and title of security forces member person.

1.9.4. If the person granting consent is not a suspect, line out "suspected." Write in the offense(s) or matters being investigated. Have the individual initial after the offense.

1.9.5. Have the individual read or read the next paragraph to the individual and have them initial the beginning and end of the paragraph.

- 1.9.6. Have the individual read or read the next paragraph to the individual. Have the individual cross out the applicable wording whether day time/night time. Have them initial at the beginning and end of the paragraph.
- 1.9.7. Identify all the areas to be searched. Show possession by using the word "My." Example: My person (Give full name), My vehicle (1962 Chevrolet pick up truck, OK Lic. #234-FED, My dwelling or room or house (Lodging Bldg 1234, room 222).
- 1.9.8. Have the individual read the next paragraph to the individual and have them initial the beginning and end of the paragraph.
- 1.9.9. Date, location and time of consent: Self-explanatory. Place location and time in the "at \_\_\_\_\_."
- 1.9.10. Signature of the person giving consent.
- 1.9.11. Signature of the SF requesting consent and one other witness (may be another SF member).
- 1.9.12. Prepare only one copy and retain it with the case file.
- 1.9.13. If during the search, the individual withdraws their consent, terminate the search immediately. Ensure all pertinent information (time consent withdrawn, time search terminated and actions taken to that point) are documented in the AF Form 3545, *Incident Report*.

**1.10. AF Form 3226, Authority to Apprehend in Private Dwelling - Resident .** The MCM, Rule 302(e) requires written authority be obtained prior to apprehending a person in a private dwelling. The AF Form 3226 is normally used to document receipt of this authority. ([Attachment 16](#))

- 1.10.1. The security forces personnel wanting this authority will complete the top portion of the AF Form 3226. The installation commander or appointed magistrate will sign the block reserved for the authorizing official. Rule 302(e) defines "dwelling" as single-family houses, duplexes and apartments. Private dwellings DO NOT include living areas in military dormitories, tents, field encampments, etc. The form is self-explanatory. Write a Probable Cause statement on the reverse side of the form detailing all information, giving facts and circumstances about the incident. ([Attachment 13](#))
- 1.10.2. Prior written authority is not required if certain exigencies are present, i.e., if evidence or a perceived threat exist which could cause damage, harm or loss of life or the destruction of evidence would occur if the search wasn't conducted at that time, etc. In these cases, written authority should be obtained the duty day following the apprehension.
- 1.10.3. Prepare only one copy and retain it with the case file.

**1.11. AF Form 3545, Incident Report .** Since the 1930s, the Federal Bureau of Investigations (FBI) has been collecting crime data dealing with offenses and arrests from county, state and Federal law enforcement agencies. In the late 70s, the law enforcement community called for expanded use of the data and developed new guidelines for reporting crime statistics. These guidelines were outlined in the Uniform Federal Crime Reporting Act of 1988, which formed the basis of the National Incident-Based Reporting System (NIBRS). Since the inception of NIBRS, two other Congressional Acts, the Victim's Rights and Restitution Act of 1990 and the Brady Handgun Violence Prevention Act, also impacted the amount of data collected. NIBRS requires law enforcement agencies, including the DoD, to report data to the Department of Justice (DoJ) for inclusion in the FBI-maintained system. The DoD instituted the Defense Incident-Based Reporting System (DIBRS), in order to meet the requirements of NIBRS. This is where

the very lengthy and detailed AF Form 3545 comes into the picture. Use the form as a worksheet while at the scene of an incident. This will ensure all the needed information is obtained.

1.11.1. **OVERVIEW:** The form is electronic (Formflow) and consists of 6 pages. Each page of the form is a different file within Formflow. This allows personnel to build several records within a certain page. For example there may be 3 offenders and 3 victims. In order to document each individual's information, the report writer needs 3-offender pages and 3 victim pages. To better understand the design of the form, below is a broad-brush overview of each page followed by block-by-block instructions on how to fill out the form.

1.11.1.1. **Page 1 Incident and Offense Information:** This page documents offense data, i.e. case number, time of incident, location, type of criminal activity, etc.

1.11.1.2. **Page 2 Offender Information:** This page documents offender information. There is only space for one offender. If more than one offender is involved in the incident, simply add a record in Formflow and fill in the information.

1.11.1.3. **Page 3 Victim, Witness, Complainant:** This page documents the victim's, witness' or complainant's information. The majority of this page is designed for the victims, so if using it for a witness or complainant, do not fill in any of the victim blocks, just leave them blank.

1.11.1.4. **Page 4:** This page documents three different sections; property, SF members at incident and administrative disposition.

1.11.1.5. **Page 5: Commander's Section:** This page is for the offender's commander. If more than one offender, add additional records to this page with the offender and victim pages. The commander documents the action taken against the offender and forwards to the Reports and Analysis Section.

1.11.1.6. **Page 6 Narrative:** This page is used to document the narrative and any other portions of the form needed.

1.11.1.6.1. **PAGE 1 ([Attachment 17](#))**

1.11.1.6.1.1. **ORI NUMBER:** Completed by the Reports and Analysis.

1.11.1.6.2. **CASE NUMBER:** Completed by the Reports and Analysis Section. This is the number assigned by the agency to each Incident Report to identify it uniquely; e.g., the Originating Agency Case (OAC) Number.

1.11.1.6.3. **SECTION I INCIDENT NOTIFICATION**

1.11.1.6.3.1. **Date Received (YYYYMMDD):** Enter date the incident was received.

1.11.1.6.3.2. **Time Received:** Enter the time (military time 2400) the incident was received.

1.11.1.6.3.3. **How Complaint Received:** Enter how the incident was received. 911 call, crime stop call, by mail, in person, etc.

1.11.1.6.4. **SECTION II OFFENSE**

1.11.1.6.4.1. **Incident Occurred Between:**

1.11.1.6.4.1.1. **Date (YYYYMMDD):** Enter the date when the incident occurred or started or the beginning of the time period in which it occurred (as appropriate).

- 1.11.1.6.4.1.2. Time: Enter the occurred begin time (24hour).
- 1.11.1.6.4.1.3. End Date (YYYYMMDD): Enter date when the incident ended or the end of the time period in which it occurred.
- 1.11.1.6.4.1.4. Time: Enter the occurred end time (24-hour).
- 1.11.1.6.4.1.5. Offender Number: Each offender in the incident is assigned a sequence number from 01 to 99.
- 1.11.1.6.4.1.6. Offense Identifier: Enter the charge or the offense code. In the case of UCMJ violations, enter the punitive article that is appropriate.
- 1.11.1.6.4.1.7. Offense Statutory Basis: This data element indicates the source of the statute violated; i.e., the statutory basis of the offense and the jurisdiction involved. Federal includes any Federal Statute other than UCMJ. (Refer to Statutory basis codes in Section II of the AF Form 3545)
- 1.11.1.6.4.1.8. Offense Result: This data element indicates whether the offense was completed or merely attempted. If there was more than one occurrence of the same offense within an incident and one was completed, then completed should be entered. (Refer to offense result codes in Section II of the AF Form 3545)
- 1.11.1.6.4.1.9. Involvement: Allowable codes are:
- 1.11.1.6.4.1.9.1. P=Principal: One who commits or is an accomplice to a crime.
  - 1.11.1.6.4.1.9.2. A=Accessory: One who incites, aids or abets a lawbreaker in the commission of a crime but is not present at the time of the crime.
  - 1.11.1.6.4.1.9.3. C=Conspiracy: An agreement between two or more persons to commit a crime.
  - 1.11.1.6.4.1.9.4. S=Solicit: To entice into illegal action.
  - 1.11.1.6.4.1.9.5. Bias Motivation Codes: The object of this collection is to indicate whether the offender was motivated to commit the offense because of bias against a racial, religious, ethnic/national origin, sexual orientation or disability group (Refer to bias motivation codes in Section II of the AF FM 3545). Because of the difficulty of ascertaining the offender's subjective motivation, bias is to be reported only if investigation reveals sufficient objective facts to lead a reasonable and prudent person to conclude the offender's actions were motivated, in whole or in part, by bias. While no single fact may be conclusive, facts such as the following, particularly when combined are supportive of a finding of bias:
    - 1.11.1.6.4.1.9.5.1. The offender and the victim were of different racial, religious, ethnic/national origin or sexual orientation groups or disability status.
    - 1.11.1.6.4.1.9.5.2. Bias-related oral comments, written statements or gestures were made by the offender which indicate bias.
    - 1.11.1.6.4.1.9.5.3. Bias-related drawings, markings, symbols or graffiti were left at the crime scene.

1.11.1.6.4.1.9.5.4. Certain objects, items or things that indicate bias were used or left behind, e.g., the offenders wore white sheets with hoods covering their faces.

1.11.1.6.4.1.9.5.5. The victim is a member of a racial, religious, ethnic/national origin sexual orientation or disability group that is overwhelmingly outnumbered by members of another group in the neighborhood where the victim lives and the incident took place. This factor loses significance with the passage of time, i.e., it is most significant when the victim first moved into the neighborhood and becomes less and less significant as time passes without incident.

1.11.1.6.4.1.9.5.6. The victim is visiting a neighborhood where previous hate crimes were committed against other members of his or her racial, religious, ethnic/national origin, sexual orientation or disability group and where tensions remain high against the group.

1.11.1.6.4.1.9.5.7. Several incidents have occurred in the same locality, at or about the same time and the victim are all of the same racial, religious, ethnic/national origin, sexual orientation or disability group.

1.11.1.6.4.1.9.5.8. A substantial portion of the community where the crime occurred perceives the incident was motivated by bias.

1.11.1.6.4.1.9.5.9. The victim was engaged in activities promoting his or her racial, religious, ethnic/national origin, sexual orientation or disability group, e.g., the victim, a member of the NAACP, participated in gay rights demonstrations.

1.11.1.6.4.1.9.5.10. The incident coincided with a holiday relating to or a date of particular significance to a racial, religious, ethnic/national origin, sexual orientation or disability group, e.g., Martin Luther King Day.

1.11.1.6.4.1.9.5.11. The offender was previously involved in a similar hate crime or is a member of a hate group.

1.11.1.6.4.1.9.5.12. There were indications a hate group was involved, e.g., a hate group claimed responsibility for the crime or was active in the neighborhood.

1.11.1.6.4.1.9.5.13. A historically established animosity exists between the victim's group and the offender's group.

1.11.1.6.4.1.9.5.14. The victim, although not a member of the targeted racial, religious, ethnic/national origin, sexual orientation or disability group, is a member of an advocacy group supporting the precepts of the victim group.

The aforementioned factors are not all-inclusive of the types of objective facts which evidence biased motivation. Reporting agencies must examine each case for facts that clearly evidence the offender's bias motivated him/her to commit the crime. Agencies must be alert to misleading facts, e.g., the offender used an epithet to refer to the victim's race, but the offender and the victim were of the same

race. Agencies must be alert to evidence left by the offenders, which is meant to give the false impression the incident was motivated by bias. Even if the offender was mistaken in the belief the victim was a member of a racial, religious, ethnic/national origin, sexual orientation or disability group, the offense is still a hate crime as long as the offender was motivated by bias against that group. For example, a middle-aged, non-gay man walking by a bar frequented by gays was attacked by six teenagers who mistakenly believed the victim had left the bar and was gay. Although the offenders were wrong on both counts, the offense is a hate crime because it was motivated by the offenders' anti-gay bias.

**EXAMPLE 1:** While driving through a predominantly Mexican-American neighborhood, a black male stopped his car to repair a flat tire. A group of Mexican-American leaving a bar across the street accosted the driver and attacked him with bottles and clubs. During the attack, the offenders called the victim by a well-known and recognized epithet used against blacks and told him blacks were not welcome in the neighborhood. This incident would be reported as anti-black because blacks were not welcome in the neighborhood. This incident would be reported as anti-black because the victim and offenders are of different races, the offenders used a racial epithet and the facts reveal no other reason for the attack than the stated one, i.e., to keep blacks out of the neighborhood.

**EXAMPLE 2:** A white juvenile male snatched a Jewish woman's purse and in doing so, knocked her down and called her by a well-known and recognized epithet used against Jews. The offender's identity is not known. Although the offender used an epithet for Jews, it is not known whether he belongs to another religious group or whether his motive was anything more than robbery. Because the facts are ambiguous, agencies should not report this incident as bias motivated.

**EXAMPLE 3:** Overnight, unknown persons broke into a synagogue and destroyed several religious objects. The perpetrators left a large swastika drawn on the door and wrote, "Death to Jews" on the wall. Although valuable items were present, none were stolen. Report this incident as Anti-Jewish because the offender destroyed religious objects, left anti-semitic words and graffiti behind and theft did not appear to be the motive for the burglary.

**EXAMPLE 4:** A 29-year-old Chinese-American male was attacked by a 51-year-old white male wielding a tire iron. The victim suffered severe lacerations and a broken arm. The incident took place in a parking lot next to a bar. Investigation revealed the offender and victim had previously exchanged racial insults in the bar, the offender having initiated the exchange by calling the victim by a well known and recognized epithet used against the Japanese and complaining the Japanese were taking away jobs from Americans. Anti-Asian/Pacific Islander offense would be reported based on the difference in race of the victim and offender, the exchange of racial insults and the absence of other reasons for attack.

**EXAMPLE 5:** An adult white male was approached by four white teenagers who requested money for the bus. When he refused, one of the youths said to the others, "Let's teach this (epithet for a gay person) a lesson." The victim was punched in the face, knocked to the ground, kicked several times and robbed of his wristwatch, ring and wallet. When he reported the crime, the victim advised he did not know the offenders and he was not gay. The facts are ambiguous. Although an epithet for a gay person

was used by one of the offenders, the victim was not gay, such epithets are sometimes used as general insults regardless of the target person's sexual orientation and in this case the offenders' motivation appeared to be limited to obtaining money from the victim. Therefore, the incident would not be designated bias motivated.

**EXAMPLE 6:** A small neighborhood bar frequented by gays burned down after being closed for the night. Investigation revealed the fire was deliberately set. The fact that the bar was frequented by gays may have been coincidental. Therefore, the incident is not reported as bias motivated. Two weeks later, three white adult males were arrested on a tip from an informant. They admitted burning down the bar, saying they did it to keep gays out of the neighborhood. As a result, this incident should now be reported as a bias crime.

**EXAMPLE 7:** Six black men assaulted and seriously injured a white man and his Asian male friend as they were walking through a residential neighborhood. Witnesses said the victims were attacked because they were trespassing in a "black" neighborhood. An Anti-Multi-Racial Group bias incident should be reported because the victim and offenders were of different races and witnesses reported the victims were attacked because they were not black.

**EXAMPLE 8:** Overnight, an auditorium, which was being used by representatives of several religious denominations to hold an ecumenical conference, was vandalized by unknown subjects. Extensive damage was caused and statements, such as "There is but one true religion" and "Down with the nonbelievers," were spray painted onto the walls. An Anti-Multi-Religious Group incident should be reported because the offenders clearly evidenced their hostility against a group representing more than one religion.

1.11.1.6.4.1.10. Location/Address: Enter the location and address of the offense, i.e., Rm. 210, Bldg 100, Lackland AFB, TX 78236.

1.11.1.6.4.1.11. U.S. State or Possession: Enter "Yes" if the offense occurred in US or its possessions.

1.11.1.6.4.1.12. Sector: Enter the sector of the installation the offense occurred.

1.11.1.6.4.1.13. On Uniformed Service Installation: Enter "Yes" if the offense occurred on DoD or Coast Guard property.

1.11.1.6.4.1.14. Location of Offense: Mark the appropriate location. (Self-explanatory)

1.11.1.6.4.1.15. Type of Criminal Activity: Mark the appropriate block. (More than one block may be marked)

1.11.1.6.4.1.16. Illegal Entries: This data element is used only if the offense is Burglary/B&E. It is for reporting whether "Force" or "No Force" was used by the burglar(s) to enter the structure. A forced entry is where force of any degree or a mechanical contrivance of any kind (including a passkey or skeleton key), was used to

unlawfully enter a building or other structure. An unforced entry is one where the unlawful entry was achieved without force through an unlocked door or window. If both forced and unforced entries were involved in the crime, the entry should be reported as having been accomplished through "Force."

1.11.1.6.4.1.17. **Number of Premises Entered:** This data element is used only if the crime is Burglary/B&E and the "Hotel Rule" is applicable. In such cases, the number (01-99) of structures (premises) entered is to be reported. In the Summary Reporting System, the Hotel Rule is applied to only temporary lodgings. It states: If a number of dwelling units under a single manager are burglarized and the offenses are most likely to be reported to the police by the manager rather than the individual tenants, the burglary should be scored as one offense. The hotel rule may include military living quarters with multiple dwelling units. For example, if 6 BEQ are entered at the same time, it should be reported as one incident. The Hotel Rule has been expanded to include rental storage facilities, i.e., "Mini-Storage" and "Self-Storage" buildings. Therefore, this data element is to be used if the offense is Burglary/B&E and either "Hotel/Motel/Etc." or "Rental Storage Facility" is entered into Location Type. The total number (up to 99) of individual rooms, units, suites, storage compartments, etc., entered is to be reported in this data element.

1.11.1.6.4.1.18. **Page number:** Enter the report's total number of pages, i.e., 1 of 8, 1 of 6, etc. Page numbers will depend on the number of offenders, victims, witnesses and length of narrative.

#### 1.11.1.7. PAGE 2 (**Attachment 18**)

1.11.1.7.1. **SECTION III OFFENDER:** If there is more than one offender, add a record within Formflow for any additional offenders.

1.11.1.7.1.1. **Suspect:** Mark this block if the offender is suspected of a crime (not enough probable cause to apprehend).

1.11.1.7.1.2. **Subject:** Mark this block if the offender is the subject of a crime (enough probable cause to apprehend).

1.11.1.7.1.3. **Offender Identifier:** Assigned a sequence number from 01 to 99 to each offender. If nothing is known about the offender(s), enter "00" into this data element and leave the rest of the segment blank. (Applies to both suspects and subjects)

1.11.1.7.1.4. **Name, Last:** Enter the last name.

1.11.1.7.1.5. **Name, First:** Enter the first name.

1.11.1.7.1.6. **Name, Middle:** Enter the middle name.

1.11.1.7.1.7. **Name, Cadency:** Enter the Cadency (Jr., Sr. and III) name, if applicable.

1.11.1.7.1.8. **Grade:** Enter offender's grade

1.11.1.7.1.9. **Name, Alias/Nickname:** Enter any alias or nickname, if applicable.

1.11.1.7.1.10. **Driver's License Number:** Enter the driver's license number.

1.11.1.7.1.11. **Driver's License Source:** Enter the state issuing the driver's license.



- 1.11.1.7.1.32. **How Dressed:** Enter how the offender was dressed. (Military or Civilian and condition of clothing)
- 1.11.1.7.1.33. **Identifying mark:** Mark "T" for tattoo, "S" for scar or "M" for mark, in the appropriate location if offender has any identifying marks.
- 1.11.1.7.1.34. **Identifying mark description:** Enter a short description of any tattoos, scars or marks (for example, a flower, 3 inch scar, etc.)
- 1.11.1.7.1.35. **Race:** Mark the appropriate block.
- 1.11.1.7.1.36. **Sex:** Self-explanatory
- 1.11.1.7.1.37. **Apprehension date (YYYYMMDD):** Enter the date of apprehension.
- 1.11.1.7.1.38. **Type of Apprehension/Detention:** Allowable codes are: On-View Arrest, Summons or Taken into Custody. This data element indicates the type of apprehension. On-View Arrest includes arrests when the offender is taken into custody without a warrant or previous incident report. Summoned/cited type is not taken into custody. Taken into custody arrest types are based on warrant and/or previously submitted incident report.
- 1.11.1.7.1.39. **Detention type:** This data element indicates whether the detention is DoD or another government agency. Any agency outside DoD is considered Non-uniformed service.
- 1.11.1.7.1.40. **Juvenile Disposition:** Juvenile is defined as a person under 18 years of age.
- 1.11.1.7.1.41. **Multiple incident cleared (completed by SFAR or SFOI):** This data element indicates whether or not the apprehension of the offender resulted in the clearance of more than one previously reported incident within the jurisdiction served by the reporting agency. If so, it is important to indicate there was only one offender responsible for the multiple clearances. This is done by entering "Multiple" into all but one of the offender segments and by entering "First Record of Multiple" into the remaining offender Segment.
- 1.11.1.7.1.42. **Offender used:**
- 1.11.1.7.1.42.1. **Alcohol:** This data element indicates whether the offender was suspected of consuming alcohol. For example, witnesses to an assault reported the victim and offender were in a bar drinking beer when an argument broke out and the offender attacked the victim with a knife.
  - 1.11.1.7.1.42.2. **Drugs:** This data element indicates whether the offender was suspected of using drugs.
  - 1.11.1.7.1.42.3. **Computer equipment:** This data element indicates whether the offender was suspected of using computer equipment to perpetrate the crime. Larceny of computer equipment should not be included in this element.
  - 1.11.1.7.1.42.4. **Not applicable:** Self-explanatory.
- 1.11.1.7.1.43. **Type weapons/force used:** This data element indicates whether the offender was armed with a commonly known weapon at the time of his/her apprehension. If a gun is involved, enter A= Fully Automatic, M= Manual or S= Semi-Automatic, in the appropriate block.

1.11.1.7.1.44. **Page number:** Enter the appropriate page number. If more than one offender is involved, add additional records/pages.

1.11.1.8. **Page 3/SECTION IV VICTIM, WITNESS and COMPLAINANT:** There is only enough space for one victim, witness or complainant. If there is more than one victim, witness or complainant, add a record within Formflow to add an additional page. (**Attachment 19**)

1.11.1.8.1. **Victim/witness/complainant category:** Mark the appropriate category; victim, witness or complainant.

1.11.1.8.1.1. **Victims:** Definition self-explanatory.

1.11.1.8.1.2. **Witness:** Defined as a person that witnessed the crime but was not victimized by it.

1.11.1.8.1.3. **Complainants:** Defined as a 3<sup>rd</sup> party person that didn't witness the crime or is a victim of the crime. For example, a victim of a crime asks an innocent bystander (complainant) to call 911. In this case, the complainant is merely reporting a crime they didn't witness.

1.11.1.8.1.4. **NOTE:** A person may seem to fall into two categories when they report a crime if they are a victim. For example, a person calls and reports their car was stolen from the BX parking lot. It would appear they are a victim and complainant since they are reporting it stolen. Always categorize this type of person as a victim. Remember complainants are third party personnel that are not victims or witnesses.

1.11.1.8.2. **DD Form 2701:** Used for victims and witnesses. Mark the appropriate block, Yes or No.

1.11.1.8.3. **Victim Identifier:** Assigned a sequence number from "001" to "999" to each victim involved in the incident (Victims only).

1.11.1.8.4. **Name, last:** Enter the last name of victim, witness or complainant.

1.11.1.8.5. **Name, first:** Enter the first name of victim, witness or complainant.

1.11.1.8.6. **Middle initial:** Enter the middle initial of victim, witness or complainant.

1.11.1.8.7. **Grade:** Enter grade of victim, witness or complainant.

1.11.1.8.8. **SSN:** Enter Social Security Number of victim, witness or complainant.

1.11.1.8.9. **Date of birth (YYYYMMDD):** Enter the date of birth of victim, witness or complainant.

1.11.1.8.10. **Age:** Enter age of victim, witness or complainant.

1.11.1.8.11. **Current Street Address:** Enter street address or apartment number of victim, witness or complainant.

1.11.1.8.12. **City:** Enter city the victim, witness or complainant resides in.

1.11.1.8.13. **State:** Enter the state the victim, witness or complainant resides in.

1.11.1.8.14. **Zip:** Enter the 9-digit (if known) zip code the victim, witness or complainant resides in.

1.11.1.8.15. **Organization/employer/sponsor's name & grade:** Enter the organization of the victim, witness or complainant. If the victim, witness or complainant is a family member, enter the sponsor's name, grade and organization.

1.11.1.8.16. **Work phone:** Enter the victim, witness or complainant's work phone. If victim, witness or complainant is a family member enter sponsor's work phone.

1.11.1.8.17. **Home phone:** Enter the victim, witness or complainant's home phone.

1.11.1.8.18. **Service:** Enter the appropriate service. Allowable codes are:

Army	Coast Guard
National Oceanic and Atmospheric Administration	
Air Force	Public Health
Marine Corp	Navy

1.11.1.8.19. **Component:** Enter Uniformed Service Component; Regular, Reserve or National Guard, if applicable.

1.11.1.8.20. **Victim type (VICTIM ONLY):** Only one block can be marked for each victim. For example, during a bank robbery, the offender pointed a gun at a teller and demanded and received money. The robber also pistol-whipped a customer who stood in his way as he made his escape from the bank. There were three victims; i.e., the bank, the teller and the pistol-whipped customer. Therefore, their codes should be entered into their respective Victim Segments. The victim type must agree with the offense information. For example, assault offenses should have Victim Type = "I". Allowable codes are:

Individual	Government
Business	
Financial	Religious Org
Society/Public	

1.11.1.8.21. **Personal Status:** Enter Federal Civil Servant, Uniformed Service Retiree, Federal Contractor, Uniformed Service Family Member or Other to identify the status.

1.11.1.8.22. **Victim's race (VICTIM ONLY):** Enter the offender's race. Allowable codes are:

American	White	Black
Indian	Hispanic	
Unknown	Asian/Pacific Islander	

1.11.1.8.23. **Victim's sex (VICTIM ONLY):** Self-explanatory.

1.11.1.8.24. **Relationship of victim to offender (VICTIM ONLY):** This data element is used to show the relationship of the victim to offender(s). Mark the appropriate block with an X. If more than one offender enter offender number in the block. Additionally, offender's numbers are used to associate the victims involvement with the offense identifier, offense statutory basis, offense result, offense involvement and bias motivation from the codes listed on page 1 of the form.

1.11.1.8.25. Justifiable homicide circumstances (VICTIM ONLY): This data element describes the circumstances of a justifiable homicide. Therefore, it is used only for Justifiable Homicide, (i.e., when either Criminal Killed by Private Citizen or Criminal Killed by Police Officer was entered into Aggravated Assault/Homicide Circumstances. Refer to table 1, Section IV, AF FM 3545 for justifiable homicide codes. (Entered by SFAR or SFOI after an investigation.)

1.11.1.8.26. Injury type (VICTIM ONLY): This data element describes the type(s) of bodily injury suffered by a person (i.e., Individual was entered into Victim Type) who was the victim of one or more of the following offenses: (Refer to table 2, Section IV, AF FM 3545 for injury codes.)

1.11.1.8.27. Aggravated assault/homicide circumstances (VICTIM ONLY): This data element describes the circumstances of either an aggravated assault or a homicide. Therefore, it is to be used only with Aggravated Assault and Homicide Offenses. Refer to table 3, Section IV, AF FM 3545, for aggravated assault/homicide codes. (Entered by SFAR or SFOI after an investigation)

1.11.1.8.28. Page number: Enter the appropriate page number. Add additional records if more than one victim, witness or complainant were involved in the incident.

#### 1.11.1.9. Page 4 SECTION V PROPERTY ([Attachment 20](#))

1.11.1.9.1. Property description: This data element describes the property that was burned, counterfeited, destroyed/damaged/ vandalized, recovered, seized or stolen. Refer to table 4 of Section V, AF Form 3545, for the allowable codes.

1.11.1.9.2. Serial number: Self-explanatory.

1.11.1.9.3. Secured/unsecured: Enter "S" for secured or "U" for unsecured. This data element specifies the level of security of the property.

1.11.1.9.4. Loss Codes: This data element describes the type(s) of property loss, recovery, seizure, etc., which occurred in an incident. (Refer to table 5, section V, AF Form 3545 for property loss codes.)

1.11.1.9.5. Quantity: This data element reports the number (up to 999,999,999) of items listed in the property description column. Leave this column blank on: Drugs/narcotics, Money, Negotiable Instruments and Nonnegotiable Instruments.

1.11.1.9.6. Ownership: This data element describes whether the government or a private individual owns the property. (Refer to table 6, section V, AF FM 3545 for ownership codes.)

1.11.1.9.7. Value of Property: Enter the total dollar value (up to \$999,999,999) of the property which was burned (includes damage caused in fighting the fire), counterfeited, destroyed/damaged/ vandalized, recovered, seized, stolen, etc., as a result of the incident. If the value is unknown, enter one dollar (\$1.00) which means unknown; i.e., "1" = Unknown. The following guidelines should be used to report the value of property:

1.11.1.9.7.1. Use **fair market value** for articles subject to depreciation because of wear and tear, age or other factors that cause the value to decrease with use.

1.11.1.9.7.2. Use **cost to the merchant** (wholesale cost) of goods recovered, seized and stolen, dollar etc., from retail establishments, warehouses, etc. In other words, use the value representing the actual cash loss to the victim without any markup or profit added.

1.11.1.9.7.3. Use victim's valuation of items such as jewelry, watches and other similar goods that decrease in value slightly or not at all with use or age.

1.11.1.9.7.4. Use replacement cost or actual cash cost to victim for new or almost new clothes, auto accessories, bicycles, etc.

1.11.1.9.7.5. When the victim obviously exaggerates the value of stolen/destroyed/damaged property for insurance or other purposes, common sense and good judgment will dictate a fair market value to be placed on the stolen items by law enforcement.

1.11.1.9.7.6. For government property, use fair market value for articles subject to depreciation. Use replacement cost for other types of property.

1.11.1.9.7.7. In most instances, accept the victim's valuation. The theft of nonnegotiable instruments such as traveler's checks, personal checks, money orders, stocks, bonds, food stamps, etc., should be scored but no value recorded. Again, "hair-splitting" refinements are unnecessary. Negotiable instruments such as bonds payable to the bearer, etc., are valued at the current market price at the time of the theft, seizure, etc. Values should be rounded to the nearest whole dollar. Often the condition of the property is different at recovery than it was when stolen. The market value at the time of recovery should be used even though it is less than the value reported at the time of the theft. If the value has increased by the time the property is recovered, the recovery value should not exceed its value at the time it was stolen.

1.11.1.9.7.8. If drugs or narcotics were seized in a drug case, no value is to be entered into this data element, but the estimated quantity of the drugs/narcotics is to be reported. Therefore, when the offense is Drug/Narcotic violations, "Seized" was entered into Property Loss/etc, and "Drugs/ Narcotics" was entered into Property Description. No value is to be entered into this data element and Drug Code, Drug Quantity and Type Drug Measure are to be used instead. However, when drugs or narcotics are involved in other types of crime (e.g., they were stolen through burglary, robbery, theft, etc. or destroyed by arson) their value is to be entered into this data element and Drug Code, Drug Quantity and Type Drug Measure are blank.

1.11.1.9.8. Date recovered (YYYYMMDD): Enter the date the stolen property was recovered. Accordingly, this data element is used only if Recovered is entered into Data Element Type Property Loss/Etc. If there is more than one date of recovery for the same "Property Description," enter the earliest date. If the recovery date is unknown, enter the date of the report.

1.11.1.9.9. Date returned (YYYYMMDD): When previously stolen property is returned, the date of return is entered in this data element. Accordingly, this data element is used only if Recovered or Seized is entered into Data Element Property Loss/Etc.

1.11.1.9.10. Drug code: This data element is used to identify the types of drugs or narcotics seized in a drug case. Refer to table 7, Section V, AF FM 3545 for drug codes.

1.11.1.9.11. Estimated drug quantity: This data element indicates the quantity (up to 999,999,999) of drugs or narcotics seized in a drug case. This data element is not used when drugs or narcotics were burned, stolen, etc., in connection with other offenses, such as Arson, Burglary/B&E, Larceny/Theft, etc.

1.11.1.9.12. Type drug measurement: This data element indicates the type of measurement used in quantifying drugs or narcotics seized in a drug case. This data element is not used when drugs or narcotics were stolen, burned, etc. (Refer to table 8, section V, AF FM 3545 for drug measurement codes).

1.11.1.9.13. SECTION VI SECURITY FORCE MEMBER AT INCIDENT: Self-explanatory

1.11.1.9.14. Enclosures: List all statements and receipts associated with the report.

1.11.1.9.15. SECTION VII ADMINISTRATIVE DISPOSITION (FOR SFAR USE ONLY).

1.11.1.9.15.1. Referred to: Self-explanatory

1.11.1.9.15.2. Number of victims notified (SFAR USE ONLY): Self-explanatory

1.11.1.9.15.3. Number of witnesses notified (SFAR USE ONLY): Self-explanatory

1.11.1.9.15.4. Distribution: Self-explanatory

1.11.1.9.15.5. Incident clearance reason (SFAR USE ONLY). This data element indicates why the incident was cleared. If the incident is not cleared by "Unfounded "or" Arrest", then the incident is considered to be exceptionally cleared. In a multiple-offense incident, the exceptional clearance of one offense clears the entire incident. An incident cannot be cleared exceptionally if it was previously or at the same time cleared by an arrest; i.e., if an offender segment was or is being submitted. In order to clear an offense by exceptional means, the following four conditions must be met: (1) the investigation must have clearly and definitely established the identity of at least one offender; (2) sufficient probable cause must have been developed to support the arrest, charging and prosecution of the offender; (3) the exact location of the offender must be known so an arrest could be made; and (4) there must be a reason outside the control of law enforcement which prevents the arrest. If blank, this data element will be recorded to "Not Applicable."

1.11.1.9.15.6. Exceptional clearance date YYYYMMDD (SFAR USE ONLY): If an incident was cleared by exceptional means, enter the date when the incident was cleared. If Incident Clearance Reason contains the values A-E, this field is required. The clearance date cannot be earlier than the incident date.

1.11.1.9.15.7. Page number: Enter the appropriate page number.

1.11.1.10. Page 5/SECTION VIII COMMANDER'S ACTION SEGMENT (FOR SFAR AND COMMANDER'S USE ONLY). ([Attachment 21](#))

1.11.1.11. Page 6/NARRATIVE: Document the details of the incident; who, what, when, where and how. Include attitude at time of apprehension and give details if uncooperative. Additionally, use the narrative section to continue any section on the form and to further explain the incident. Use of other products in lieu of the narrative page are authorized. At the end of the narrative, four lines down, put in the security forces member's signature block, then another four lines down put in the flight leader/flight sergeant's signature block. ([Attachment 22](#))

1.11.1.12. GENERAL COMMENTS: If sections or blocks don't apply, simply leave blank.

**1.12. DD Form 460, Provisional Pass .** This form is issued by a security forces member to an enlisted member of the Armed Forces. Information required by the form is self-explanatory. ([Attachment 24](#)) The DD Form 460 is issued when:

1.12.1. The member is apprehended for a minor violation which does not require detention, but which may result in a delay preventing them from reporting to their assigned duty section/ installation within the time limit indicated on their orders or pass.

1.12.2. The member's previous pass has expired or he/she is without a pass or leave orders, but is en route to his/her destination as evidenced by a valid transportation ticket.

1.12.3. The member can present evidence they reported or attempted to report his/her delay to his/her commander.

1.12.4. Through extenuating circumstances, the members missed their transportation, are delayed through no fault of their own and voluntarily report their status to proper authority.

1.12.5. It is necessary to order an individual to return to their home station after apprehension for AWOL. The form is prepared as follows:

1.12.5.1. Prepare the form in triplicate, either typed or printed in ink. Give the original copy to the member concerned, forward the duplicate copy to the member's unit commander and file the third copy at Reports and Analysis.

1.12.5.2. The information required on the front of the form is self-explanatory. The individual to whom the pass is issued must sign the form at the bottom of the reverse side, acknowledging the order to report to their commander as soon as possible.

**1.13. DD Form 1408, Armed Forces Traffic Ticket:** This form is issued to an individual who has committed a moving or non-moving traffic offense. It is prepared in three copies. The original (white) copy ([Attachment 27](#)) is submitted through channels to the violator's commander or if the violator is a military family member, to the sponsor's commander. If the violator is a civilian employee, the white copy is sent to the individual's commander. The ticket is sent to commanders for action to be taken against the violator. Ensure this form is completely filled out. Use the following procedures to assist with filling out the front side of the white, yellow and pink copies: ([Attachment 25](#))

1.13.1. If the ticket is a "warning" place an "X" in the warning block. Write the warning in the remarks section.

1.13.2. Last name, first name, MI of the violator.

1.13.3. Rank and grade of violator. Example: SSgt/E-5 (when applicable: FM/W/S/D or CIV.)

1.13.4. Violator's date of birth.

1.13.5. Violator's social security number.

1.13.6. Organization of active duty violators to include the complete duty station address. Remember, some installations may issue 1408s to family members and DoD civilian employees. For family members include their home address and for civilian employees put in their duty sections.

- 1.13.7. Violator's driver license number: If the violator is operating a POV, use their state license. If the violator is operating a GOV and they have a government issued operator's permit, use the number of their government drivers license.
- 1.13.8. If the violator is operating a POV, cross out the word military, circle the word state and write in the state that issued the license. If the violator is operating a GOV, cross out the word state and circle the word military and write in the base that last stamped their military license.
- 1.13.9. Make or type of vehicle. Example: Ford Mustang or Chevy S-10 Pickup.
- 1.13.10. License plate number of the vehicle and the state in which the vehicle is registered.
- 1.13.11. The vehicle's DD Form 2220 number and the installation it is registered. If the vehicle is a GOV then write "N/A." If the vehicle was issued an AF Form 75, Visitor/Vehicle Pass, write the number from the pass.
- 1.13.12. Date the violation occurred: Use standard government style (day-month-year).
- 1.13.13. Time the violation occurred.
- 1.13.14. Location where the violation occurred.
- 1.13.15. This middle section is used to indicate the violation. If the violation is speeding, place an "X" in the box and then specify the speed and the posted speed limit. Example: (30 mph in a 20 mph zone). Next, indicate the amount over the posted speed limit by placing an "X" in the appropriate block. Place an "X" in the block indicating the violation and then put an "X" in the box which indicates the specifics of the violation.
- 1.13.16. Place an "X" in one of the blocks to indicate the violation.
- 1.13.17. When a violation occurs that is not listed in this middle section, write in "see remarks." In the remarks section write in the specifics of the violation.
- 1.13.18. For parking violations, indicate the violation by placing an "X" in the appropriate block. If the violation is not listed, place an "X" in the block indicating see remarks and then indicate the violation in the remarks section.
- 1.13.19. If the pavement was slippery, indicate how by placing an "X" in the appropriate block, i.e., rain, snow, ice, etc.
- 1.13.20. If it was dark when the violation occurred, indicate by placing an "X" in the appropriate block.
- 1.13.21. If there was other traffic present when the violation occurred, indicate by placing an "X" in the appropriate block.
- 1.13.22. If the violator caused a person to dodge, indicate by placing an "X" in the appropriate block.
- 1.13.23. Indicate the area where the violation occurred.
- 1.13.24. Indicate the highway type on which the violation occurred. Note that highway is a generic term for the type of roadway it was, i.e., two lane, four lane.
- 1.13.25. If an accident is the result or possible result of the violation, indicate the type of accident: PD - property damage, PI - personal injury, fatality, pedestrian, vehicle or fixed object. Place an "X" in all blocks that apply to the accident.

1.13.26. Use the remarks section to indicate violations not listed on the 1408. For speeding violation indicate how the speed was determined. If radar was used, give the radar model # and serial #. If the pacing method was used, indicate how far the vehicle was paced and add the registration number of the police vehicle that was used to pace.

1.13.27. Print name of person who is issuing the ticket.

1.13.28. Organization and installation of person who is issuing the ticket.

1.13.29. Rank/Grade of person issuing the ticket.

1.13.30. If the individual being issued the ticket is a family member, write the sponsors rank, name and organization in the section to the left side of the ticket number in the block marked "NAME."

1.13.31. The second (yellow) copy is used by security forces to record pertinent information. It can record details about the instructions issued to the violator, names of witnesses to the offense and vehicle defects. Use this information later to refresh the patrol person's memory if the ticket is contested. The yellow copy is then filed in the security forces administrative section. Use the following to help with filling out the back of the yellow copy: ([Attachment 26](#))

1.13.31.1. This area is used for notes. It is filled out after the pink copy is given to the violator and they have been released. Answer the following questions:

1.13.31.1.1. Any action of violator which increased the hazard of the violation? If none, indicate so, i.e.: N/A, none, etc.

1.13.31.1.2. Write where the violation occurred and where the traffic stop took place?

1.13.31.1.3. Distance traveled during pursuit. If any, i.e. 5/10 of a mile or .5 miles.

1.13.31.1.4. Condition and attitude of the violator and any special instructions given to the violator. If there was a problem, document exactly what was said. If local policy dictates, record the facts on an AF Form 1168, then attach it to the white copy.

1.13.32. Witnesses: Write down the name of any witnesses to the violation.

1.13.33. Vehicle Defects: Self-explanatory

1.13.34. The third copy (pink) is given to the violator or affixed to the vehicle if the vehicle is unattended. Complete the back of the pink copy before giving it to the violator. This gives the violator written reporting instructions. This must be done even if the violator has been given verbal instructions. Normally, the back of the pink copy is completed before the back of the yellow copy. This prevents the violator from being detained for an unnecessary amount of time. Use the following to help with filling out the back of the pink copy: ([Attachment 27](#))

1.13.34.1. Place an "X" in all three of the boxes.

1.13.34.2. In the second block, write in the telephone number for the security forces control center in the space provided.

1.13.34.3. Write under special instructions: "Report this violation to your commander on your next duty day." Also, write any additional instructions the violator may have been given.

1.13.35. File the second (yellow) copy and give the third (pink) copy to the violator or place it on the windshield of the unattended vehicle. If there is inclement weather it may be a good idea to place the ticket in a plastic baggie.

1.13.36. The reverse side of the DD Form 1408 is used for transmittal of traffic violations through military channels. Ensure the violation indicated on the DD Form 1408 is in accordance with AFI 31-204 and all required information is carefully entered on the form.

1.13.37. Ensure the required information is annotated. If the ticket has administrative errors, it will be returned to SFO for correction. If the ticket needs to be voided, the issuing security forces member or CSF may do so. No other person has the authority to void a ticket.

**1.14. AF Form 3907, Security Forces Field Interview Data.** This form is used to record routine contact between security forces members and members of the public in accordance with AFI 31-206, *Security Forces Investigations*. For example, if a suspicious person was observed walking around the housing area in the middle of the night, this form would be used to record the contact made with the individual. The form is filled out in one copy and is forwarded to the security forces Investigations Section. The Investigations Section can then compare this form with reported crimes in the area to develop possible leads or suspects. The form is self-explanatory. ([Attachment 23](#))

**1.15. DD Form 1805, United States District Court Violation Notice:**

1.15.1. This form is used when it is determined an offender will be prosecuted for a minor offense before a U.S. Magistrate under AFI 51-905, Use of US Magistrates for Trial of Misdemeanors Committed by Civilians. This violation notice is not to be issued to active duty military personnel in accordance with AFI 31-204, *Air Force Motor Traffic Vehicle Supervision*. If the nature of the offense indicates custody and arraignment of the accused is not appropriate, the security forces or other person, that is, a civilian guard, a police or game warden who are authorized to make an apprehension, arrest or to issue a violation notice or ticket, will issue this form. Before it is distributed, the specific address of the Clerk of the United States Court (Central Violations Bureau) to which the violator must address his/her communication will be stamped (or typed) in black ink, on the reverse of the violator's copy (manila card stock) of the four-part form. The DD Form 1805 is accountable once it is issued to the violator.

1.15.2. When completing the DD Form 1805, security forces personnel must take great care to assure each entry is legible and no entry is smudged on the chemically carbonized paper copies. Use the following to assist with filling out the form. ([Attachment 29](#) & [Attachment 30](#)) **NOTE:** Required information for the violation notice may vary from installation to installation. Consult with the local SJA for further processing requirements.

1.15.2.1. Block 1: Write in the name of the installation.

1.15.2.2. Block 2: This is the violation notice number, do not place anything in this block.

1.15.2.3. Block 3: Print the last name, first name and middle initial of the issuing patrol person.

1.15.2.4. Block 4: Document the number used to identify the patrol person. This can be the issuing patrol persons first letter of their last name followed by the last four numbers of the social security number.

1.15.2.5. Block 5: Annotate the date and the time of the offense.

1.15.2.6. Block 6: Offense charged: Write in the appropriate violation/offense code which corresponds with the offense committed.

1.15.2.7. Block 7: Place of offense: Write the place where the violation occurred.

- 1.15.2.8. Block 8: Enter the offense committed. For example if the individual was speeding, the following would be written in the block "Speeding 39 MPH in a 30 MPH zone." Genesis radar #1922, seatbelt yes or no, insurance yes or no.
  - 1.15.2.9. Blocks 9 through 24: Self-explanatory
  - 1.15.2.10. Block 25: Check item "B," then have the violator initial which choice they prefer to accomplish.
  - 1.15.2.11. Blocks 26 through 30: Accomplish as required by local requirements and the Staff Judge Advocate (SJA) .
  - 1.15.2.12. Block 29: Enter the amount of the fine.
  - 1.15.2.13. Block 30: Enter the current day and month.
  - 1.15.2.14. Block 31: Enter the current year.
  - 1.15.2.15. Block 32: Enter the district where the installation is located.
  - 1.15.2.16. Block 33: Enter the state where the installation is located. This is also the beginning of the area where the probable cause statement will be written. The probable cause statement is the most important item on the DD form 1805. Contact local SJA for guidance on completing this section.
  - 1.15.2.17. Block 34: Check one of the four boxes which is appropriate for the situation.
  - 1.15.2.18. Block 35: Write the current date followed by the patrol persons signature.
  - 1.15.2.19. Block 36: This section will be left blank.
- 1.15.3. The entry for the amount of the fine, mandatory court appearance of offender and date of appearance are determined with guidance furnished by the District Court Clerk (Central Violations Bureau).
- 1.15.4. After the notice is issued, the following disposition is mandatory:
- 1.15.4.1. The original copy (white) will be forwarded by the issuing security forces activity (SFAR) to the Central Violations Bureau.
  - 1.15.4.2. The second copy (pink) is maintained in SFAR's file.
  - 1.15.4.3. The third copy (manila card stock) is given to the violator, or if it is a parking violation, placed on the vehicle. The violator is to insert the fine payment and mail the ticket/envelope to the Central Violations Bureau.
  - 1.15.4.4. The violation notice will be voided only by one designated base official, the Chief of Security Forces (CSF). This ensures the integrity of the ticket issuing process. The CSF is responsible to the United State Magistrate's Court and only voids violation notices in cases of honest mistaken identity of person or obvious legal error. All spoiled tickets will be disposed of according to the guidelines furnished by the court.
- 1.15.5. Ensure all required information is annotated. If the violation notice has administrative errors, it will be returned to SFO. If the ticket needs to be voided, the CSF must do so.

**1.16. DD Form 1920, Alcoholic Influence Report.** This form is used to record tests and observations made of someone suspected of being involved in any incident where alcohol or drugs may be a factor. The predominant incident is usually someone driving under the influence. The apprehending security forces member will complete the form and it will become a record of their observations for future reference. Record all observations made, including those not required by the DD Form 1920. From these facts, anyone may reach his/her own conclusions. Use the following to assist with filing out the form: ([Attachment 31](#) & [Attachment 32](#))

- 1.16.1. Installation: Self-explanatory
- 1.16.2. Violation report number: Leave blank. (SFAR use only)
- 1.16.3. Accident report number: Leave blank. (SFAR use only)
- 1.16.4. Date, time and location of the accident or incident: Put time, date and incident where the location occurred.
- 1.16.5. Date and time in custody: Self-explanatory
- 1.16.6. Apprehending Officer: Rank and name of security forces member.
- 1.16.7. Name of Subject: Full name of subject.
- 1.16.8. Grade/Category: Put in rank or grade.
- 1.16.9. Social security number: Self-explanatory
- 1.16.10. Unit of assignment/address: If active duty, annotate the individual's organization and installation where assigned. If civilian or a family member, document complete home address.
- 1.16.11. Indicate whether the subject was the driver, passenger or a pedestrian.
- 1.16.12. Age: Self-explanatory
- 1.16.13. Sex: Self-explanatory
- 1.16.14. Approximate Weight: Self-explanatory
- 1.16.15. Operator's License Number: Self-explanatory
- 1.16.16. State: State where drivers license was issued.
- 1.16.17. SECTION 1 - OBSERVATIONS
  - 1.16.17.1. Made by: Name, grade, SSAN and organization of person who made the apprehension.
  - 1.16.17.2. Witnessed by: Name, grade, SSAN and organization of person who witnessed the observations. (i.e. usually the apprehending security forces member's partner.)
  - 1.16.17.3. Clothes: Describe in full detail each item of clothing as it applies. Then indicate the condition of clothing and describe in a brief statement, especially if the condition was of a disorderly nature.
  - 1.16.17.4. Breath: Indicate the presence of an odor of an alcoholic beverage.
  - 1.16.17.5. Attitude: Indicate the individual's attitude, (one or more may be used).
  - 1.16.17.6. Unusual Actions: Indicate any unusual actions, (one or more may be used).
  - 1.16.17.7. Speech: Indicate the individual's ability to speak (one or more may be used).

1.16.17.8. Spontaneous Acts: Indicate any spontaneous acts or utterances the individual makes. Keep in mind the individual's physical condition. Also, note anything a suspect says that would indicate alcohol involvement and may be used against/for them.

1.16.17.9. Indicate briefly what first led the security forces member to suspect alcoholic influence: Self-explanatory.

1.16.17.10. Sign or complaints of illness or injury: Indicate any signs or complaint of injury or illness. If no visible signs are present, the security forces member must ask the individual if they are ill or taking any medications (vomiting is a sign of illness, medical assistance may be needed)

#### 1.16.18. SECTION II – PERFORMANCE TESTS

1.16.18.1. Administered By: Name, grade, SSAN and organization of person administering performance test. Usually the apprehending security forces member.

1.16.18.2. Date and time the tests were performed. Self-explanatory. NOTE: Even if the individual does not perform a field sobriety test, in most cases, the balance/walking and turning portions of the test can still be observed. State the reasons in the remarks section why the test was not performed.

1.16.18.3. Balance: Indicate the individual's ability to maintain their balance (one or more may be used).

1.16.18.4. Walking: Indicate the individual's ability to walk (one or more may be used).

1.16.18.5. Turning: Indicate the individual's ability to turn (one or more may be used).

1.16.18.6. Finger to nose is not used.

1.16.18.7. Coins: Picking up coins is no longer used.

1.16.18.8. Ability to understand instructions: Indicate the individual's ability to understand instructions.

1.16.18.9. Effects of alcohol: Indicate the effects of alcohol and the individual's ability to operate a vehicle.

1.16.18.10. Remarks: Indicate any other information relevant to this particular incident.

#### 1.16.19. SECTION III – INTERVIEW

1.16.19.1. Prior to completing section III, advise the person of their rights under the appropriate rights advisement. If they are coherent enough to understand their rights and are willing to answer questions, complete section III. If not, cross out section III and in the top margin indicate why the interview was not conducted. If the interview is conducted, ask each question as it is worded. Write down the individual's exact response, no matter what the response.

1.16.19.2. Handwriting specimen: Have individual write anything they choose.

1.16.19.3. Interviewer to fill in actual: In this block, put the time, day and date the interview was conducted. Also, put in rank and name of who conducted the interview.

#### 1.16.20. SECTION IV – CHEMICAL TEST DATA

1.16.20.1. Type of specimen: Indicate which type of specimen was taken and which type of test was used.

- 1.16.20.2. Time, date and location of the test: Self-explanatory.
- 1.16.20.3. Name, grade, SSAN and organization.
- 1.16.20.4. Indicate the blood alcohol level.
- 1.16.20.5. If a chemical test was not conducted, state the reason.
- 1.16.20.6. If any type of video or audio recordings are made of the individual, indicate the type of coverage, what portion of the process was recorded, who made the recording and what legal statute authorizes such recordings.
- 1.16.20.7. List witnesses to the incident and additional passengers in the subject's vehicle.

**1.17. DD Form 2701, Initial Information for Victims and Witnesses of Crime.** This form is issued to all personnel where criminal conduct adversely affects victims or where witnesses provide information regarding criminal activity. If in doubt, issue the form. The form gives the individual information on the Victim/Witness Assistance Program (VWAP). The form is self-explanatory. Information needed to complete the form can be obtained from the base legal office or the security forces Investigations Section. When the form is issued, it must be documented on the AF Form 3545, *Incident Report*. Further information on the AF Form 2701 and the VWAP is contained in AFI 31-206, *Security Forces Investigations*. ([Attachment 33](#) & [Attachment 34](#))

**1.18. DD Form 2708, Receipt for Inmate or Detained Person.** This form is used when security forces personnel are releasing an individual they have detained or apprehended. The form is self-explanatory and should be prepared in two copies. The original form is maintained with the case file and the copy is given to the individual who receipted for the individual as a source document indicating an official transfer of the individual. ([Attachment 35](#))

## CHAPTER 2

### SECURITY FORCES REPORTS AND ANALYSIS

#### 2.1. Processing the DD Form 1408.

2.1.1. Log the DD Form 1408 into a local suspense tracking system to monitor the ticket and update SFMIS. If violators are transferred to another base, the driving records (a SFMIS printout) will be forwarded to the gaining installation CSF.

2.1.2. Place the yellow copy of the DD Form 1408 in the suspense file pending disposition. Complete blocks 19-23 on the back of the white copy, annotate any prior history, points assessed, and a suspense date. In the “Report of Action Taken on Traffic Violation”, black out the words “No Action Taken”, this is not an option. Forward the white copy to the offender’s commander for action. NOTE: If the commander feels the individual was not guilty of the offense, the ticket must be resolved through the rebuttal process as outlined in 2.1.6..

2.1.3. Establish a 14-day suspense for command action. Check the suspense folders to determine action required. Extensions may be granted on case-by-case basis. If response on command action is not received by the due date, dispatch a “Notice of Late Suspense” letter (normally pre-signed by the CSF) giving an additional 7-day suspense. If the additional suspense is not met, send a “Notice of Second Late Suspense” to the unit commander with a courtesy copy to the group commander (on this notice, it is recommended the CSF individually sign each letter).

2.1.3.1. Since tickets require command action, they must be signed by the violator’s unit or squadron section commander. First sergeants or other personnel may complete the administrative process of the ticket; however, the ticket must be signed by the commander or squadron section commander. ([Attachment 28](#))

2.1.4. Once finalized, record command actions and enter them into the SFMIS database. File the original DD Form 1408 as required by AFMAN 37-139.

2.1.5. If a DD FM 1408 was issued during the course of an accident investigation, a copy of the accident report is attached to the ticket when it is sent for command action.

2.1.6. Procedures for Rebutting the DD Form 1408.

2.1.6.1. The violator must submit a rebuttal letter articulating his/her position to the CSF through SFAR within 10 days of receipt of the ticket. The letter must be endorsed by his/her commander. The purpose of this endorsement is to ensure commander-level involvement. The commander must add comments supporting the violator’s guilt or innocence.

2.1.6.2. SFAR will attempt to obtain a written statement from the patrol person issuing the ticket for inclusion in the rebuttal package. The completed package will be forwarded to the CSF for his/her annotation/recommendation and subsequently to the rebuttal authority (wing commander’s designee—usually the Support Group Commander) for final decision. Once the rebuttal authority has made a decision, SFAR will notify the violator of the final outcome of his/her ticket rebuttal.

#### 2.2. Processing the DD Form 1805.

2.2.1. Log the DD Form 1805 into the local tracking system in SFAR and update SFMIS on the ticket. If violators are transferred to another base, the driving records (a SFMIS printout) will be forwarded to the gaining installation CSF.

2.2.2. The pink copy is filed in the suspense file pending disposition. Mail the white copy to the Central Violations Bureau (CVB) at the local Magistrate's location.

2.2.3. A Magistrate Court Docket will be developed by the CVB and the listing will be forwarded to SFAR.

2.2.4. Using the CVB Docket listing, pull the pink and yellow copies for Magistrate Court as indicated by the local staff judge advocate.

2.2.5. After Magistrate's action, enter action taken in the SFMIS database. File the pink and yellow copies as required by AFMAN 37-139.

2.2.6. Procedures for Rebutting the DD Form 1805:

2.2.6.1. Violators who receive a DD FM 1805 will be presented with the opportunity to rebut a ticket through the Magistrate Court System on a date scheduled by the CVB. The violator may call the Magistrate for additional information on the status of their ticket. The SJA and SFAR representatives, along with the court clerk, will take into account all information presented by the violator and determine if the ticket merits dismissal. The SJA attorney has the final word on whether or not to dismiss the ticket. SFAR personnel serve primarily in an advisory and administrative capacity.

2.2.6.2. If the violator still wishes to rebut the DD FM 1805 and wishes a hearing with a federal magistrate, SFAR will obtain a court schedule through SJA and notify the security forces member of their scheduled appearance or obtain a written statement from the patrol person who issued the ticket and provide it to SJA, as appropriate. The federal magistrate will make the final determination as to guilt or innocence.

2.2.6.3. CVB provides SFAR with a list of the status of all tickets they processed. SFAR cross-checks this list with the ticket tracker and SFMIS.

### **2.3. Processing Reports.**

2.3.1. Review reports for accuracy and all required information. If a report is incomplete, return it to the appropriate office, annotating the corrections required. Issue a suspense date and annotate the date on a report tracking log/binder. Periodically check the log/binder for any due suspense.

2.3.2. When entering the report into the SFMIS database, ensure the narrative is included as part of the case record.

2.3.3. Establish a 14-day suspense for reports requiring commander action and place them in a suspense file. Annotate suspense date on the cover letter of the report. Prior histories are normally provided only for suspects/subjects of the report. If prior histories exist, print the form record(s) and attach them to the report being dispatched. Check the suspense folder to determine action required. Extensions may be granted on a case-by-case basis. If response on command action is not received by the due date, dispatch a letter, "Notice of Late Suspense" (normally pre-signed by the CSF) giving an additional 7-day suspense. If the additional suspense is not met, send a "Notice of Second Late Sus-

pense” to the unit commander with a courtesy copy to the group commander (on this notice, it is recommended the CSF individually sign each letter).

2.3.3.1. Incident reports require command action, therefore, they must be signed by the violator’s unit or squadron section commander. First sergeants or other personnel may complete the administrative process of the report; however, the report must be signed by the commander.

2.3.4. For reports pertaining to civilians not affiliated with the base or retired military and their family members, the installation commander or designee will determine the disposition. For shoplifting and family member misconduct cases, local supplements will identify the action authority. Disposition will be determined by the action authority.

2.3.5. For incidents involving members from other DoD components, the initial incident report will be logged into the SFMIS database with an action copy being forwarded to the individual’s installation provost/military police unit. Identify “forwarding of the report” in the narrative portion. Air Force personnel not at home station involved in incidents will be logged into the SFMIS database and an action copy forwarded to the military member’s home station CSF for processing. The individual’s home station SFAR will track the incident for final disposition/commanders action through the SFMIS database using the existing record and case number entered by the base where the incident occurred. Do not generate a new case. Use the existing case previously entered in the SFMIS.

2.3.6. “Information Only” are reports with no subject. Annotate the “Action Required” in the SFMIS database with “Information Only”. A copy of the report is provided to appropriate commanders upon request.

2.3.7. Reports Sent for Additional Investigation:

2.3.7.1. If a report meriting additional investigation needs to be sent to SFOI, a copy of the AF FM 3545 and all attachments is forwarded. The report is suspended for 14 days using a cover letter.

2.3.7.2. Reports are not releasable until final investigation is completed. If a report is investigated by AFOSI, a copy of the report with a Request For Investigation/ Declination cover letter is sent with a 14-day suspense. The letter must be returned with the OSI commander’s written acceptance/declination.

2.3.7.3. Upon completion of the investigation, reports may be released to the SJA as necessary. Unit commanders receive either an action or information copy of the report.

2.3.8. Reports Not Returned by the Suspense Date:

2.3.8.1. Extensions may be granted on case-by-case basis. If response is not received by the due date, dispatch a letter, “Notice of Late Suspense ” (normally pre-signed by the CSF) giving an additional 7-day suspense. If the additional suspense is not met, send a “Notice of Second Late Suspense” to the unit commander with a courtesy copy to the group commander (it is recommended the CSF individually sign each letter).

2.3.8.2. In all instances, keep all correspondence or make a memo concerning any communication about a case and file same with the report. This accounts for any actions SFAR takes with a case and provides commanders or other action authorities the reasons for any delays in processing the report.

## 2.4. Forwarding/Disposition of Driving Records.

2.4.1. If violators are transferred to another base, the driving records (SFMIS printout) will be forwarded to the gaining installation. Upon receipt of the PCS orders or rosters, check the ticket and accident SFMIS tracking database for any priors on the violator. If a traffic record exists, forward to the CSF of the gaining base. Annotate action taken on the appropriate tracker.

2.4.2. If the violator will be separating or retiring, reflect the latest status on all records.

## 2.5. Parking Warden Program.

2.5.1. Units may develop local procedures to address a parking warden program. A local supplement to AFI 31-204, *Air Force Motor Vehicle Traffic Vehicle Supervision*, will require individual unit commanders to delegate traffic wardens, in writing, for participation in the parking warden program. SFAR will obtain a letter with the current monitors and maintain the letter on file. The letter should specify a minimum of one primary and alternate at the grade of E-5 or above. All monitors will issue parking tickets on the DD Form 1408.

2.5.2. Monitors will be trained by the security forces unit on the correct way to complete tickets. The main difference between a DD FM 1408 issued by a security forces member and one by a parking monitor is the special instructions on the back of the pink copy that directs the violator to contact the monitor who issued the ticket instead of the usual Security Forces Control Center. It is important that monitors include how or where they can be reached by the violators. When contacted by the violator, the monitor will fill in any pertinent missing data in sections 1-10. Tickets that are incomplete or were written by personnel not designated as a parking wardens will not be processed and will be returned to the unit. Parking wardens will only issue tickets for areas under the control of their commander.

## 2.6. Preparation of DUI/DWI, No Proof of Insurance or Revocation/Suspension of Base Driving Privileges Packages.

2.6.1. Prepare a folder on the individual with the following paperwork:

2.6.1.1. Request for legal review/coordination.

2.6.1.2. Copy of the preliminary driving revocation letter (pre-signed by the wing commander or his/her designee and normally issued by the apprehending/detaining security forces member).

2.6.1.3. Copy of the DUI/DWI, no insurance or driving while license suspended/revoked report or ticket (to include any command action already taken).

2.6.1.4. Any blood alcohol results (if available).

2.6.2. Log revocations and suspensions into the SFMIS database and initiate the routing specified on the coordination sheet and in the SFMIS instructions. The installation commander's designated official is the final action authority for these packages and signs them. Revocations received from other bases or services will be honored and processed in the manner outlined herein.

2.6.3. SFAR will provide a copy of all suspension/revocation lists to SF operations for use at installation entry points. Installation commanders may honor suspensions and barments from other installations. Barments will be processed as outlined in AFI 31-101. ([Attachment 36](#))

2.6.4. If a certified suspension/revocation letter is returned as undeliverable, ensure SFAR retains the original with the case file and forwards a copy to the Security Forces Control Center. In the event con-

tact is made with the subject on base, the on-duty flight will then be able to issue the letter to the violator and forward the signed letter to SFAR for attachment to the case file.

2.6.5. Update the suspension/revocation/barmnt listing as soon as the authority commander signs the package.

2.6.6. Once the letter is returned with the appropriate signature from the action authority, inform the individual's commander. The individual and their supervisor are required to respond to SFAR for issuance of the revocation letter where the individual will sign the final revocation letter. If the person is not military affiliated, send the letter by certified mail to the violator's listed address. If overseas, local procedures will be developed to meet notification needs.

2.6.7. If a rebuttal is requested, provide the individual with instructions to submit their rebuttal letter through SFAR to the installation commander or their designee for driving revocations and installation commander for barmnts.

## **2.7. Notifying State Licensing Offices.**

2.7.1. State licensing agencies will be notified, by mail, of all DUI/DWI cases as well as revocations of base driving privileges or refusal to submit to a blood alcohol test. A sample memo is located at **Attachment 37**. Telephone numbers for state agencies is located on the HQ AFSFC web page at <http://afsf.lackland.af.mil/index.htm>. Under the "Organization" section, click on the Security Forces Center, then Operations Division and finally click on the Police Services Branch. Once inside this folder, click on the icon for State Licensing Agency Telephone Number Listing.

2.7.2. Develop a pre-typed notification memo.

## **2.8. Preparation of Revocation of Exchange/Commissary Privileges Packages.**

2.8.1. Review report.

2.8.2. Ensure an on-scene revocation of AAFES/Commissary Privileges Letter was issued.

2.8.3. Prepare the final AAFES/Commissary Revocation Letter and a copy of the case file and send it through the base SJA and to the wing commander or their designee for signature. Ensure the SFMIS case is updated accordingly.

2.8.4. Once the letter is returned with the appropriate signature from the action authority, inform the individual's commander. SFAR is required to see the individual and their supervisor/sponsor to issue the final revocation letter. If the person is not military affiliated, send the letter by certified mail to the violator's listed address. If overseas, local procedures will be developed to meet notification needs.

## **2.9. Certified Mail Procedures.**

2.9.1. Some correspondence is sent outside of government channels and requires accountability of receipt. Letters may be sent certified mail. Get the SFAR certified mail log and obtain the next certified mail number in the sequence. All the forms should be typed. Annotate the SFAR certified mail number underneath the last line of the return address on the envelope. That number also goes on the front, lower left hand corner of the PS FM 3811, *Domestic Return Receipt*. Obtain a certified mail PS FM 3800 and affix it to the middle, upper, front portion of the envelope.

2.9.2. Prepare a PS Form 3811. Annotate in section 4a the article number which is the same control number listed on the PS FM 3800. In section 4b, check the box for the appropriate correspondence being sent (certified). On the bottom of the PS FM 3811, indicate the case number and or type of incident case the PS FM 3811 pertains to (i.e. I-00-02-050/Driving Revocation).

2.9.3. Type an AF FM 12, *Accountable Container Receipt*. In the "TO" block, type information in all capital letters:

UNIT DESIGNATION

PHYSICAL ADDRESS

AIR FORCE BASE, STATE AND ZIP CODE

Each envelope counts as a separate item number. Under the container number, write the SFAR log number in numerical order. Under reference, write in all capital letters, "certified/return receipt requested" for each entry. After the last entry, type dashes and the words "LAST ITEM" and finish with more dashes to the end of the row.

2.9.4. Wrap the AF FM 12 around the envelopes which will be in numerical order and secure them with a rubber band. Place package in the outbound distribution bin. When BITS picks up the mail, they will acknowledge receipt of the forms and leave the top copy of the AF FM 12 behind for filing.

2.9.5. The PS FM 3811 will be returned to SFAR signed if the addressee acknowledged it. The PS FM 3811 will be returned to SFAR with the envelope still attached to it if it was undeliverable. If the package returned is a barment, send the original letters to the Operations Branch and file the envelope along with the other receipts in the case folder. All other incidents are filed directly in the case folder.

## **2.10. Preparing Packages for Filing.**

2.10.1. Once a package has been coordinated, a file folder will be prepared with a copy of the report and signed package. Prepare the label and ensure it specifies the deletion date for the file. As a reminder, certain steps must be completed before the file can be closed (i.e. driver safety course, notification to state licensing agencies, etc). The case is then filed accordingly.

2.10.2. IAW para **2.19.1.**, AFI 31-206, "Within the Air Force, AFOSI is the agency responsible for putting data in DCII. Security forces will provide original reports of investigations; AF Forms 3545, Incident Reports and DD Forms 1805, United States District Court Violation Notice, for crimes investigated as shown in **Attachment 2**. Reports and Analysis Sections will maintain copies of these reports and forms in accordance disposition of records requirements.

## **2.11. Requests for Information.**

2.11.1. All information will be released as required by AFI 33-332, *Air Force Privacy Act Program* and DOD Regulation 5400.7/AF Supplement, *Air Force Freedom of Information Act Program*. Individuals or agencies desiring to obtain copies of reports (to include enclosures) or security forces blotters will accomplish the following:

2.11.2. If the requester desires copies of statements, they will have to submit a request under the *Privacy Act* (AFI 33-332) or the *Freedom of Information Act*, as required by DOD Regulation 5400.7, as supplemented.

2.11.3. Insurance companies requesting case reports concerning clients make the request in writing. A fee will be assessed in accordance with DOD Regulation, 7000.14-R, Volume 11a, *Reimbursable Operations, Policy and Procedures*. Company checks will be used and made payable to base finance and mailed to the local SFAR office. Checks accrued will be taken to finance using DD FM 1131, *Cash Collection Voucher*, on a periodic basis. No fees are assessed to private individuals requesting information on incidents they were involved in unless copies exceed regulatory amounts. Consult DOD 7000.14-R for further guidance.

2.11.4. Police or certain government agencies (Drug Enforcement Agency, Police Departments, Recruiters, Family Advocacy) requesting information for official reasons will receive all requested information. The request will be made either in person upon proper identification or using official letterhead. The written request can be mailed or faxed. Ensure the requester is advised to include point of contacts, mailing addresses and phone or fax numbers to ensure a prompt response. Insure requesters are authorized release under the Privacy Act (AFI 33-332) before disclosing the information. The requester's letter will be attached to the case files/blotters for a matter of record. Responses can be mailed or faxed back. Maintain a log to verify action was completed.

## 2.12. Privacy Act Considerations.

2.12.1. Protect all personal information from disclosure to third parties in accordance with AFI 33-332, *Air Force Privacy Act Program*, unless they are an authorized recipient under the Act. All non-disclosable information, (i.e. all social security numbers, dates of birth and addresses) will be blacked out (**Do not black out original records**). A copy is made of the blacked out case file if needed to preclude the possibility of being able to read through any markings. Clipping and pasting from the file (if available) on the computer is also possible as long as the appropriate text has been sanitized.

2.12.2. If the requester wants copies of all information concerning other parties not represented or involved, they will have to submit a request under the Freedom of Information Act, DOD Regulation 5400.7/AF Supplement, unless the other party has previously given written consent.

**2.13. Release of Information Where the Government is a Party.** If the government was involved in an incident or the situation might result in litigation against the government, the staff judge advocate will be consulted prior to any release.

## 2.14. Freedom of Information Act (FOIA) Requests.

2.14.1. Periodically, SFAR receives requests from entities requesting the release of information citing the Freedom of Information act per DOD Regulation 5400.7, AF Supplement, *Freedom of Information Act*. Each FOIA case will be expedited as quickly as possible since by law responses have to be provided within 20 workdays after receipt of the request by the FOIA office. Instructions are provided in the case file and will be followed. Contact the base FOIA office with any questions.

2.14.2. All enclosures to a report or blotter (i.e. statements, receipts, pictures, AF FMs 52/Evidence Tag, etc.) will be afforded the same FOIA considerations if specifically petitioned for by the requester.

If pictures are requested and only negatives are available, the requester will be informed of the potential cost he/she would incur in order to initiate processing of the images.

**2.15. Conducting Local Records Checks.** Local record checks will be conducted for law enforcement/official government agencies. Requests can be written, faxed (on official letterhead) or in person with proper identification from requester. Criminal checks as part of a law enforcement investigation require no prior consent from the person(s) being checked. Only local base record checks can be conducted by SFAR. Using the NCIC for background checks for employment purposes are strictly prohibited by the National Law Enforcement Telecommunications Systems Handbook, dated 1 Jan 99, House Bill 471 & 1354.

**2.16. Tracking Reports and Statistics.** Police blotters are received by SFAR by e-mail and/or hard copy on a daily basis. The blotters will be reviewed for content and accuracy and maintained as required by AFMAN 37-139, *Records Disposition Schedule*. All AF Forms 3545 incident reports and AF Forms 1315, major accident reports, appearing in the blotter will be logged into the SFMIS. All trackable incidents in the blotter will be highlighted and entered into the SFMIS according to category, (e.g. Larcenies, Accidents, DUI's, Suicide Attempts, Damage to Property) and used by the SFAR or SFO for statistical crime data information reporting.

**2.17. Forwarding/Purging of Driving/Criminal Records.**

2.17.1. Upon receipt of PCS orders, conduct a SFMIS check. If the person listed on the orders has a driving/criminal record, attach a copy of the orders to the SFMIS printout and forward all driving/criminal records on file to CSF at the gaining base. If the violator has a file (i.e. driving revocation package) that is still active and hasn't expired, make a copy of the package and forward it along with the orders to the gaining base CSF.

2.17.2. The original case file will be filed appropriately. Document the disposition of the record in SFMIS. If the violator has separated, attach a copy of the orders to the current file to reflect the new status and possibly a different address.

**2.18. Preparation of Barment Letter and Distribution of Barment/Revocation Lists.**

2.18.1. When an individual is to be barred from the installation, they will be issued a barment letter documenting the barment. Use [Attachment 36](#) to assist with completing the barment letter.

2.18.2. Distribute according to local procedures.

**2.19. Administrative Hold Listing.**

2.19.1. Frequently, members of the squadron who respond to incidents get placed on administrative hold in order to be made available for upcoming court cases.

2.19.2. The orderly room must be listed on the squadron out-processing checklist for both PCS and TDY. Verify the latest admin hold list before initialing a member's checklist. If there are any questions as to the releasability of a member, consult with the legal SJA.

**2.20. Destruction of Material.** All information containing Privacy act data or sensitive information will be properly disposed of as required by AFMAN 37-139, *Records Disposition Schedule* and AFI 33-332, para 7.3.

**2.21. Disposition of Files from Active to Inactive and Staging.**

2.21.1. Disposition of SFAR records is governed by AFMAN 37-139. Blotters are destroyed (by shredding) at the end of their retention period.

2.21.2. At the end of the calendar year, reports in the inactive file are removed and boxed. Prepare an SF 135 for sending the records to staging. Consult the squadron's Functional Area Records Manager (FARM) for directions on completing the form, and obtaining, packing, and marking the boxes. Based on local procedures, make an appointment through the FARM with base records management personnel and take the records to the staging area for storage.

**2.22. Disposition of Barment, AAFES & Driving Revocation Packages.**

2.22.1. Remove barment and AAFES revocation case files upon completion of the timeframe specified on the folder and put them in the inactive files to be destroyed as required by AFMAN 37-139.

2.22.2. Driving Revocations are removed at the end of their timeframe and put in the inactive file to be destroyed one year after removal from the active file. All destructions will be completed as required by AFMAN 37-139.

## CHAPTER 3

### SECURITY FORCES MANAGEMENT INFORMATION SYSTEM (SFMIS) AND THE DEFENSE INCIDENT-BASED REPORTING SYSTEM (DIBRS)

#### 3.1. Security Forces Management Information System (SFMIS)

3.1.1. Policy. The use of SFMIS is mandatory IAW AFI 31-203, *Security Forces Management Information System*. SFMIS is used to record and track incident reports, tickets, barments, driving records, revocations and suspensions. All DIBRS/NIBRS reportable incidents will be reported using SFMIS.

3.1.2. Use AF Form 3545, *Incident Report*, to collect DIBRS/NIBRS information. If blotters are used to report minor incidents, the Operations Branch shall develop a method of obtaining all information necessary for inclusion into the SFMIS database to include privacy information generally excluded from the blotters. All incidents reportable are listed in DoD 7730.47-M. If an incident is listed as reportable under DIBRS, an AF Form 3545 will be completed.

3.1.2.1. Thefts, whether secured or unsecured and regardless of the value of the item(s) stolen, are reportable and thus require an AF Form 3545. Also, drunk driving incidents are DIBRS reportable; therefore, an AF Form 3545 is required.

3.1.3. For DIBRS/NIBRS reportable incidents, complete all applicable blocks of the AF Form 3545 as the DIBRS/NIBRS data codes are built into the AF Form 3545.

3.1.4. When collecting and reporting minor traffic accident information, use the SFMIS program when an offense is related to a case. Identify how privacy data required for SFMIS reporting of DIBRS/NIBRS incidents will be provided to the Reports and Analysis Section.

#### 3.2. Defense Incident-Based Reporting System (DIBRS).

3.2.1. The Defense Incident-Based Reporting System is mandated by DoDD 7730.47 and is implemented through DoD 7730.47-M. The program falls under the spectrum of the Under Secretary of Defense for Personnel and Readiness.

3.2.2. DIBRS statistics and reports satisfy congressionally mandated requirements of the Uniform Federal Crime Reporting Act (28 U.S.C.534), the Brady Handgun Violence Prevention Act of 1994 and the statistical reporting requirements of the Victim Rights and Restitution Act of 1990 (42 U.S.C. 10601 et seq.). DIBRS statistics are reported monthly to the Defense Manpower Data Center, who in turn, extracts NIBRS data and subsequently forwards to the Federal Bureau of Investigations.

CHARLES F. WALD, Lt Gen, USAF  
DCS, Air and Space Operations

## ATTACHMENT 1

## GLOSSARY OF REFERENCES AND SUPPORTING INFORMATION

***References***

AFI 31-204, *Air Force Motor Vehicle Traffic Supervision*

DOD Regulation 5400.7, AF Supplement, *Freedom of Information Act*

AFI 33-332, *Air Force Privacy Act Program*

AFMAN 37-123, *Air Force Records Management Program*

AFMAN 37-139, *Records Disposition Schedule*

AFI 37-138, *Records Disposition, Procedures and Responsibilities*

AFI 31-101, *The Air Force Installation Security Program*

DOD Regulation 7000.14-R, Vol. IIa, Reimbursable Operations, Policy and Procedures. AFPD 31-2, *Law Enforcement*

AFI 31-201, *Security Police Standards and Procedures*

AFI 31-206, *Security Police Investigations*

***Abbreviations and Acronyms***

**AAFES**—Army and Air Force Exchange Service

**AF**—Air Force

**AFB** —Air Force Base

**AFI** —Air Force Instruction

**AFMAN** —Air Force Manual

**AFOSI** —Air Force Office of Special Investigations

**AFSFC**—Headquarters, Air Force Security Forces Center, Lackland AFB, TX

**AFVA** —Air Force Visual Aid

**CONUS**—Continental United States

**CSF** —Chief of Security Forces

**DoD** —Department of Defense

**DoDD** —DoD Directive

**ESBI** —Educational Study Block Index

**FBI**—Federal Bureau of Investigations

**HQ**—Headquarters

**HQ AFOSI** —HQ Air Force Office of Special Investigations

**ID**—Identification Card

**MCM**—Manual for Courts Martial

**NCO**—Noncommissioned Officer

**OCONUS**—Outside of Continental United States

**OPR**—Office of Primary Responsibility

**SF**—Security Forces

**SJA**—Staff Judge Advocate

**SSN**—Social Security Number

**TDY**—Temporary Duty

**UCMJ**—Uniform Code of Military Justice

**US**—United States

**USAF**—United States Air Force

**U.S.C.**—United States Code

ATTACHMENT 2

AF FORM 52, EVIDENCE TAG, FRONT

DATE 1 APR 01	TAG NO. 1061	CASE FILE NO.	LOG PAGE
SHAW AFB AF BASE OR DET/BID NO.			
On (date) <u>1 APR 01</u> at (place) <u>MAIN EXCHANGE, BLOC 11A</u> the property described below was (received from) (seized from) (obtained during search of): <u>CIV DAVID CROSS, 333-44-5555, D/P# 3209</u> <u>AAFES SECURITY</u>			
DESCRIPTION (if property is to be returned, include condition and claimed value.) <u>ONE (1) SCHWINN XXT 5000, 25 SPEED BICYCLE.</u> <u>SERIAL NUMBER TCA4217SW, MODEL NUMBER</u> <u>9999. THE BICYCLE FRAME IS GREEN IN</u> <u>COLOR WITH WHITE TRIM. THE FRONT LEFT</u> <u>FORK HAS THE NUMBER 213-46-1818 AND</u> <u>NAME NICK PRICE ENGRAVED ON IT. THE</u> <u>SEAT IS BLACK VINYL WITH CUTS IN IT. THE</u> <u>HANDLE BARS ARE WRAPPED WITH BLACK TAPE.</u> <u>THE ESTIMATE VALUE OF THE BICYCLE IS</u> <u>\$75.00. ——— LAST ITEM ———</u> <u>CIV CROSS RELATED BICYCLE WAS LEFT IN FRONT</u> <u>OF THE MAIN EXCHANGE SINCE 29 MAR 01.</u>			
SIGNATURE OF WITNESS		<i>Stacy Adams</i> SIGNATURE OF PERSON RECEIVING PROPERTY <i>[Signature]</i>	

EVIDENCE TAG AF FORM 52, JUL 86 PREVIOUS EDITION WILL BE USED.

ATTACHMENT 3

AF FORM 52, EVIDENCE TAG, CHAIN OF CUSTODY RECEIPT

CHAIN OF CUSTODY RECEIPT			
RELEASED BY (Printed name, signature, & date)	PURPOSE	CONDITION	RECEIVED BY (Printed name, signature, & date)
<i>W.P. Klipak</i> WALTER P. KLIPAK 1APR01	RELEASE TO DESK SGT	POOR	<i>Kevin Seiler</i> KEVIN SEILER 1APR01
<i>Kevin Seiler</i> KEVIN SEILER 1APR01	RELEASE TO SFOI	POOR	<i>Sam Smith</i> SAM SMITH 1APR01

(Reverse of Copy 1, AF Form 52, Jul 86)

ATTACHMENT 4

AF FORM 52, EVIDENCE TAG, RETURN OF PROPERTY RECEIPT

RETURN OF PROPERTY RECEIPT

This tag receipts for property *(taken)* (seized) from the holder by Air Force Security Police/Air Force Office of Special Investigations. It must be presented to the Evidence Custodian of the retaining office or his/her representative to obtain release of the property listed on front.

DATE PROPERTY ON REVERSE RELEASED

30 MAY 01

NAME OF PERSON TO WHOM RELEASED

TSGT SCOTT BLAKE

ADDRESS

111 AIR FORCE BLVD  
COLUMBUS AFB, MS

SIGNATURE OF PERSON TO WHOM RELEASED

*Scott Blake*

PLACE WHERE PROPERTY WAS RELEASED

SECURITY FORCES INVESTIGATIONS OFFICE, BLDG 121

SIGNATURE OF RELEASING AGENT

*Imothy Dabtec*

REMARKS (Indicate item(s) of property from front returned to owner/authorized person)

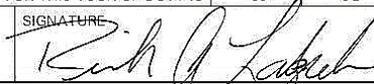
MURRAY, 21 INCH LAWNMOWER

(Reverse of Copy 2, AF Form 52, Jul 86)

## ATTACHMENT 5

## AF FORM 53, SECURITY FORCES DESK BLOTTER, FRONT

FOR OFFICIAL USE ONLY (When filled in)

SECURITY FORCES DESK BLOTTER		FROM		TO		PAGE NO.
	TIME	DATE	TIME	DATE		
	0600	20001210	1400	20001210		01
INSTRUCTIONS: Person making entry will type his or her initials in parenthesis at the end of the entry. Double space between entries.		ORGANIZATION AND BASE 48th SFS, RAF Lakneheath, UK				
ENTRY NO.	TIME	INCIDENT OR MESSAGE AND ACTION TAKEN				
01	0600	<b>BLOTTER OPENED:</b> SrA Jones/Desk Sergeant opened the blotter for this tour of duty. (JJJ)				
02	0600	<b>DESK SERGEANT RELIEF:</b> SrA Jones/SFOA relieved SSgt Jenkins/SFOB of all duties and responsibilities. All required equipment was accounted for. (JJJ)				
03	0600	<b>GUARDMOUNT:</b> Conducted by MSgt Landgrebe/Flight Sergeant. All personnel were briefed on all current pass-ons, upcoming appointments, weapons and vehicle safety. Roll call training was conducted by AIC Walker on the ground search. (JJJ)				
04	0623	<b>SHIFT CHANGE:</b> SFOA relieved SFOB of duty. (JJJ)				
05	0930	<b>THEFT OF PERSONAL PROPERTY/SECURE:</b> SMSgt Barton, Steven O., 48 CES/CELF, D/P: 3260, entered this office and related person(s) unknown had stolen his bicycle from the front of his quarters, 221B Thetford Close, Phase III housing. SMSgt Barton accomplished an AF Form 1168. SMSgt Barton related he parked and secured his bicycle at his quarters at approximately 2200, 09 DEC 00. At 0700, 10 DEC 00, when leaving for work, he noticed his bicycle missing. The bicycle is a black in color, "Huffy Stalker" with his social security number engraved on the bottom of the frame. SMSgt Barton further related the bicycle was secured with a combination lock, which he had found out. For further information refer to AF Form 3545. NOTIFICATIONS: Capt Bennett/SFO, TSgt Spurling/SFOI and MSgt O'Connor/CES-CCF. (JJJ)				
06	1023	<b>POST CHECKS:</b> Initiated by Lt Seiler/Shift Commander of all posts/patrols. (JJJ)				
07	1111	<b>FUNDS ESCORT:</b> Initiated by SrA Boyd/Police 2 for Ms Adkins/BX. The escort is from the BX to the bank.. 1117: Escort terminated, all in order. (JJJ)				
08	1130	<b>REFER TO ENTRY #06:</b> Terminated, all in order. (JJJ)				
09	1400	<b>BLOTTER CLOSED:</b> SrA Jones/Desk Sergeant closed the blotter for this tour of duty. (JJJ)				
					ENTRY NO.	PAGE NO.
					09	01
PREPARED BY (Please type)		TYPED NAME AND GRADE OF FLIGHT SERGEANT		SIGNATURE		
JOHNNY J. JONES, SRA, USAF SFOA DESK SERGEANT		RICH A. LANGREBE, MSGT, USAF FLIGHT LEADER				

AF FORM 53, 20001201 (EF-V1)

PREVIOUS EDITION WILL BE USED.

FOR OFFICIAL USE ONLY (When filled in)

ATTACHMENT 6

AF FORM 53, SECURITY FORCES DESK BLOTTER, REVERSE

FOR OFFICIAL USE ONLY (When filled in)

NAME	GRADE	POST ASSIGNMENT	TIME POSTED
JONES	SRA	DESK SERGEANT	0600
SEILER	LT	FLIGHT LEADER	0623
LANGREBE	MSGT	FLIGHT SERGEANT	0623
SKINNER	AMN	MAIN GATE	0628
HARRIS	AIC	SOUTH GATE	0627
BOYD	SRA	POLICE 2	0625
DAMEWORTH	SSGT	POLICE 3 (K9)	0625
SAXON	SSGT	POLICE 4	0625
YEAGER	SRA	POLICE 4A	0625
09: PFD			
11: ASSIGNED			
01: LEAVE (BENNETT)	AIC	15 DEC - 29 DEC 00	
01: TDY/TDA (ALLEN)	SRA	ALS 20 NOV - 22 DEC 00	
SECURITY FORCES VEHICLES			
VEHICLE	OPERATOR	VEHICLE	OPERATOR
99B 1234	SEILER		
99B 1245	LANGREBE		
99B 2367	DAMEWORTH		
98B 3428	SAXON		
98B 4545	BOYD		
92B 8219	DEADLINED		
90B 1111	STANDBY		

ATTACHMENT 7

AF FORM 75, VISITOR/VEHICLE PASS, FRONT

VEHICLE PASS	NUMBER	K 441253	
INSTALLATION NAME LACKLAND AFB			
VEHICLE YEAR	MAKE	MODEL	
1990	FORD	PROBE	
VEHICLE LICENSE NUMBER	STATE		
421-ABG	MI		
DESTINATION			
BASE EXCHANGE	COMMISSARY		
OPEN MESS	<input checked="" type="checkbox"/>	MIL HOUSING	
DELIV LOCATION	OTHER		
EDUC BUILDING			
EXPIRES (Time & Date)	TOTAL NO IN PARTY	ISSUE OFFICIAL (Time & Date)	
1645	1	1645	
28 DEC 00		25 DEC 00	

Detached From AF FORM 75, SEP 96  
COPY 1 - VISITOR

VISITOR PASS	BASE	LACKLAND AFB		NUMBER	K 441253	
ISSUED SUBJECT TO THE CONDITIONS OF THE INTERNAL SECURITY ACT OF 1950						
NAME OF VISITOR, DRIVER AND STREET ADDRESS OR FIRM (Circle applicable word)			RESERVE MIL	VISITOR	GOVT EMPLOYEE	DEPN MIL
213 DIXIE REDFORD, MI 48239				<input checked="" type="checkbox"/>		
SPONSOR OR ORGNAME			RETIRED MEMBER	TOTAL NUMBER IN PARTY (List names on file copy if local requirement)		
TS6T JOSEPH EDWARDS				1		
PHONE NUMBER			EXPIRES (Time & Date)			
555-1212			1645			
			28 DEC 00			
DESTINATION			ISSUING OFFICIAL			
BASE EXCHANGE	DELIV LOCATION	COMMISSARY	OTHER			
OPEN MESS	<input checked="" type="checkbox"/>	MIL HOUSING		SRA TURNER, SFOA		
TIME AND DATE ISSUED						
1645, 25 DEC 00						

PREVIOUS EDITIONS ARE OBSOLETE.  
AF FORM 75, SEP 96  
COPY 1 - VISITOR

ATTACHMENT 8

AF FORM 75, VISITOR/VEHICLE PASS, REVERSE

<p><b>WARNING</b></p> <p><b>CONSENT TO SEARCH, VEHICLE TOWING, REIMBURSEMENT, AND IMPOUNDMENT</b></p> <p>By accepting this pass you give your consent to search of this vehicle while it is entering, on, or leaving this Air Force Base. If your vehicle is towed or impounded, you agree to reimburse the towing agent on behalf of the vehicle owner/operator.</p> <p>Occupant restraints must be used while operating your vehicle on the DoD property.</p> <p>A test of intoxication as assimilated by state motor vehicle law or statute.</p> <p>SIGNATURE Sue Edwards</p>	<p><b>VISITOR ADVISORY</b></p> <p><b>CONDITIONS OF VISIT</b></p> <ul style="list-style-type: none"> <li>• Limit your movements to authorized traffic ways. Examples of signed closed areas are "RESTRICTED AREA" or "CONTROLLED AREA."</li> <li>• Observe traffic laws.</li> <li>• Display Vehicle Pass on inside left corner of windshield while on base (Motorcycles-stick on windshield or front fender or frame) (must be visible).</li> <li>• Person issued pass is responsible for others in party and will keep pass readily available to show proof of authorized visit by all.</li> </ul> <p>After visit, please dispose of pass as directed by security police</p>	<p><b>FOR LOCAL USE</b></p>
--	--	-----------------------------

AF FORM 75, SEP 96 (REVERSE)



ATTACHMENT 10

AF FORM 1168, STATEMENT OF SUSPECT/WITNESS/COMPLAINANT, FRONT

STATEMENT OF SUSPECT/WITNESS/COMPLAINANT				<input checked="" type="checkbox"/> SUSPECT <input type="checkbox"/> WITNESS/COMPLAINANT	
PRIVACY ACT STATEMENT					
<p><b>AUTHORITY:</b> 10 U.S.C. 8013; 44 U.S.C. 3101; and EO 9397</p> <p><b>PRINCIPAL PURPOSES:</b> Used to record information and details of criminal activity which may require investigative action by commanders, supervisors, security police, AFOSI special agents, etc.; and to provide information to appropriate individuals within DoD organizations who ensure proper legal and administrative action is taken.</p> <p><b>ROUTINE USES:</b> Information may be disclosed to local, county, state, and federal law enforcement/investigative authorities for investigation and possible criminal prosecution or civil court action. Information extracted from this form may be used in other related criminal and/or civil proceedings.</p> <p><b>DISCLOSURE IS VOLUNTARY:</b> SSN is used to positively identify the individual making the statement.</p>					
<b>I. STATEMENT INFORMATION</b>					
DATE (YYYY MM DD)	TIME	LOCATION AND INSTALLATION (Bldg/Room No)	UNIT TAKING STATEMENT	REPEAT (If known)	
00 DEC 12	1845	BLDG 5311 RM 18 LACKLAND AFB, TX	37 SFS	<input type="checkbox"/> OFFENSE <input type="checkbox"/> COMPLAINT	
<b>II. PERSONAL IDENTIFICATION (Print or Type)</b>					
NAME (Last, First, Middle Initial)		SSN	STATUS/GRADE		
BLEISTEIN, DONALD L.		123-45-6789	AD/MSGT		
LOCAL ADDRESS (Include Zip Code)		DATE AND PLACE OF BIRTH (If required)	TELEPHONE		
6789 DOLPHIN CREEK SAN ANTONIO, TX 78003		15 JUN 60 BUFFALO, NY	HOME (210) 633-4411	DUTY 3-0073	
PERMANENT ADDRESS OR HOME OF RECORD (Include Zip Code)		MILITARY ORGANIZATION/EMPLOYER		DEROS	
SAME AS ABOVE		HQ AFSFC, LACKLAND AFB, TX		N/A	
<b>SPONSOR INFORMATION</b>					
NAME (Last, First, Middle Initial)		GRADE	SSN	ORGANIZATION	DUTY PHONE
<b>III. ACKNOWLEDGEMENT OF OFFENSES AND 5TH AMENDMENT/ARTICLE 31 RIGHTS ADVISEMENT (Suspect Only)</b>					
I have been advised that I am suspected of the following offenses: <u>POSSESSION OF A CONTROLLED SUBSTANCE</u> <i>076</i>					
ADVISED BY (Full Name and Rank)		INDIVIDUAL IDENTIFIED HIMSELF/HERSELF AS A (SF, special agent, etc.)			
SRA KENNETH P. BENNETT		SECURITY FORCES PATROLMAN			
SUSPECT INITIALS	and advised me that I have the following rights according to the 5th Amendment of the U.S. Constitution/Article 31 of the Uniform Code of Military Justice.				
<i>076</i>	I have the right to remain silent - that is to say nothing at all.				
<i>076</i>	Any statement I make, oral or written, may be used as evidence against me in a trial or in other judicial, non-judicial, or administrative proceedings.				
<i>076</i>	I have the right to consult with a lawyer.				
<i>076</i>	I have the right to have a lawyer present during this interview.				
<i>076</i>	I may obtain a civilian lawyer of my own choice at no expense to the government.				
<i>076</i>	I may request a lawyer any time during this interview.				
<i>076</i>	If I decide to answer questions with or without a lawyer present, I may stop the questioning at any time.				
<i>076</i>	MILITARY ONLY: If I want a military lawyer, one will be appointed for me free of charge.				
<i>076</i>	CIVILIANS ONLY: If I cannot afford a lawyer and want one, a lawyer will be appointed for me by civilian authorities. <i>076</i>				
SUSPECT INITIALS	I have read my rights as listed above and I fully understand my rights. No promises, threats, or inducements of any kind have been made to me. No pressure or coercion has been used against me. I make the following choice. (Initial One)				
<i>076</i>	I do not want a lawyer. I am willing to answer questions or make a statement or both, about the offense(s) under investigation.				
<i>076</i>	I do not want a lawyer and I do not wish to make a statement or answer any questions.				
<i>076</i>	I want a lawyer. I will not make any statement or answer any questions until I talk to a lawyer.				
I fully understand my rights and that my signature does not constitute an admission of guilt.					
SIGNATURE OF SUSPECT			SIGNATURE OF WITNESS/INTERVIEWER		
<i>Donald L. Bleistein</i>			<i>Kenneth P. Bennett</i>		

*076*

ATTACHMENT 11

AF FORM 1168, STATEMENT OF SUSPECT/WITNESS/COMPLAINANT, REVERSE

IV. STATEMENT

ON 13 DEC 00, AT APPROXIMATELY 1130 HRS, I WENT TO THE BX TO SHOP. WHILE SHOPPING, I PICKED UP A HOOTIE AND THE BLOWFISH CD. I THEN WENT TO THE MEN'S DRESSING ROOM WHERE I PLACED THE CD IN MY JACKET. I THEN ~~SHIPPED~~<sup>WALKED</sup> WALKED AROUND FOR A WHILE, THEN EXITED THROUGH THE MAIN ENTRANCE. ONCE OUTSIDE, I WAS CONTACTED BY AAFES SECURITY, WHO ASKED ME TO COME TO THEIR OFFICE. ONCE IN THE OFFICE, I TOOK THE CD OUT OF MY JACKET AND PLACED IT ~~THE~~<sup>ON</sup> THE TABLE. AFTER THAT THE COPS SHOWED UP. <sup>JB</sup> // END OF STATEMENT // <sup>JB</sup>

V. OATH/SIGNATURE

"I hereby voluntarily and of my own free will make this statement without having been subjected to any coercion, unlawful influence, or unlawful inducement. I swear (or affirm) I have read this statement, initialed all pages and corrections, and it is true and correct to the best of my knowledge."

SIGNATURE OF PERSON MAKING STATEMENT

SIGNATURE OF WITNESS/INTERVIEWER

Subscribed and sworn to before me, a person authorized by law to administer oaths, this 13 day of DEC, 2000 (year).

SIGNATURE OF PERSON ADMINISTERING OATH

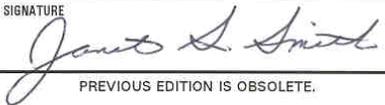
VI. INSTRUCTIONS FOR CONTINUATION PAGE(S)

Use plain bond paper (both sides optional). At the top right of each page, print or type "Last name of individual making the Statement) on (Date)." At the bottom of each page, print or type: "Page \_\_\_ of \_\_\_ Pages." The individual must initial the top and bottom entries and sign his/her name at the bottom of each page.

<sup>JB</sup>

ATTACHMENT 12

AF FORM 1176, AUTHORITY TO SEARCH AND SEIZE

AUTHORITY TO SEARCH AND SEIZE		
I have <i>(previously)</i> been informed that	<u>TSgt Randle J. Heinen</u>	
is investigating the offense of	<u>Wrongful Use and Possession of Illicit Drugs (Marijuana)</u>	
	and has requested that	
I authorize a search of the <i>(person of</i>	<u>MSgt Gus E. Duncan</u> )	
<i>(premises known as</i>	<u>Bldg 1234, Room 222, Tinker AFB, OK</u> )	
and the seizure of the following specified property:	<u>Any illicit drugs and related paraphernalia</u>	
<p>Having carefully considered the matters presented to me in support of that request, I <i>(am) (was)</i> satisfied that there <i>(is) (was)</i> probable cause to believe that the property specified above <i>(is) (was)</i> being concealed on the <i>(person) (premises)</i> described. I <i>(am) (was)</i> further satisfied from the matters presented that the said property <i>(1)</i> is evidence which will aid in the apprehension or conviction of the person(s) who committed the offense being investigated, or <i>(2)</i> is or has been used, designed, or intended for use, as the means of committing the criminal offense(s) being investigated, or <i>(3)</i> was illegally obtained as the result of the commission of the offense(s) being investigated, or <i>(4)</i> is contraband possessed or controlled in violation of law or regulation, or <i>(5)</i> is a combination of two or more of <i>(1)</i> through <i>(4)</i>.</p>		
Accordingly,	<u>TSgt Randle J. Heinen</u>	
<p>the assistance of such person or persons as may be necessary, <i>(is) (was)</i> directed to search forthwith the <i>(person) (premises)</i> described for the property specified, and if such property be found to seize and secure the same for use as evidence in any criminal prosecution hereafter initiated. This authority to search and seize <i>(is) (was)</i> issued by virtue of:</p>		
<p><input checked="" type="checkbox"/> My position as commander having jurisdiction over the <i>(person) (premises)</i> herein described.</p>		
<p><input type="checkbox"/> My delegation to me of the authority to authorize searches and seizures by the commander having jurisdiction over the <i>(person) (premises)</i> herein described.</p>		
No search conducted pursuant to the authority herein granted shall be initiated later than three days from		<u>15 Dec 2000</u>
<i>(date authority is granted).</i>		
<p>Dated this <u>15th</u> day of <u>December</u>, <u>2000</u> (year), at <u>2145 hrs., 1 Officers Row, Tinker AFB, OK</u></p>		
<b>CAUTION</b>		
<p>RECORD SHOULD BE KEPT OF THE INFORMATION GIVEN TO THE AUTHORIZING OFFICER, ON WHICH THAT OFFICER BASES THE AUTHORIZATION, FOR POSSIBLE USE IN COURTS-MARTIAL. MAKE A SUMMARY OF ORAL INFORMATION. ENSURE THAT THIS SUMMARY AND ANY WRITTEN INFORMATION RECEIVED IS PROPERLY PRESERVED. CONSULT THE STAFF JUDGE ADVOCATE. ALSO SEE AFI 31-201.</p>		
TYPED NAME, GRADE, AND ORGANIZATION AUTHORIZING OFFICIAL JANET S. SMITH, Colonel, USAF Commander, 72 ABW	SIGNATURE 	DATE (YYYY DD MM) 20001215

**ATTACHMENT 13**  
**PROBABLE CAUSE STATEMENT**

SAMPLE PROBABLE CAUSE STATEMENT

A three way call was made between myself, SrA Marchand, Capt Brown, SJA, and Col Support Group Commander, at 2345 Hrs, 19 January 2001.

Col Support Group Commander, at 2213 Hrs, 19 January 2001, while performing installation entry control procedures at the Atlantic Highway Gate, I SrA James L. Marchand, observed what I believed to be a marijuana cigarette in the center console of a white in color, 1998 Nissan Frontier pick up truck, Florida license plate #ABC 12D. I requested the vehicle operator's military identification. The operator, identified as Amn Michael Majors, SSAN 123-45-6789, 96 Transportation Squadron, Hurlburt Field, Florida, opened the driver's side window and presented his DD Form 2AF. At that time, I smelled what I believed to be marijuana emitting from the vehicle. I detained Amn Majors and had him exit his vehicle. I then notified SSgt Robert Morgan, the Security Forces Controller, who dispatched SSgt Henry Barrios and his canine, Tadoo, #KB677, to the scene. SSgt Barrios and K-9 Tadoo made a check of the exterior of the vehicle. K-9 Tadoo sat, indicating the possible presence of narcotics in the vehicle. I was certified in the smell of marijuana by S/A Villanova, AFOSI, on 22 Dec 00, during a guardmount training session. Sir, request permission to search the vehicle for the presence of marijuana, other drugs and drug paraphernalia.

Col Support Group Commander asked the following: "What makes you believe the item in the console is a marijuana cigarette?"

My response: "Sir, it is a hand-rolled cigarette with both ends twisted. In addition, I smelled what I believed to be marijuana emit from the vehicle when the suspect rolled his window down."

Col Support Group Commander: "Capt Brown, do you believe we have probable cause?"

Capt Brown stated: "Yes, sir. Amn Marchand has been certified on the smell of marijuana and you certified SSgt Barrios and K-9 Tadoo for marijuana on 14 Oct 00. Sir you have probable cause."

At 0025 Hrs, 20 January 2001, Col Support Group Commander gave consent to search.

  
JAMES L. MARCHAND, SrA, USAF  
Security Forces Member

ATTACHMENT 14

AF FORM 1361, PICK UP/RESTRICTION ORDER

PICK UP/RESTRICTION ORDER									
NAME (Last-First-Middle) WILES, Robert (NMI)		GRADE CMSgt	SSAN 234-56-1234	TIME 0130	DATE 20001225	RACE <input type="checkbox"/> BLACK <input checked="" type="checkbox"/> WHITE			
ORGANIZATION AND LOCATION 7th Supply Squadron, Dyess AFB, TX		HEIGHT 6'0"	WEIGHT 200	EYES Blue	HAIR Brown	DATE OF BIRTH 19550614			
IDENTIFYING MARKS/FEATURES/CLOTHING Tattoo on left forearm of a dragon									
OFFENSE (Reason for pick up or restriction) AWOL									
CONDITION OF INDIVIDUAL	DRUNK	ON DRUGS	DERANGED	ARMED/DANGEROUS	VIOLENT	NORMAL			
REMARKS (Use reverse side in necessary) CMSgt Wiles failed to report for duty on 23 Dec 00.									
ISSUING AUTHORITY - NAME (Last-First-Mi) SMITH, Barney L.		GRADE Lt Col	DUTY TITLE Commander	ORGANIZATION AND LOCATION 7 Supply Squadron Dyess AFB, TX					
RECEIVED BY - (Grade - Name) Manders, Charles P.		DUTY TITLE Security Forces Controller/SFOC	SIGNATURE <i>Charles P. Manders</i>						
AUTHENTICATED BY - (Grade - Name) BASS, Andrew K.		DUTY TITLE Shift Sergeant	SIGNATURE <i>Andrew K. Bass</i>						
CANCELLED BY - (Grade - Name)		DUTY TITLE AND ORGANIZATION	TIME	DATE					

AF FORM 1361, 19740601 (EF-V2)

ATTACHMENT 15

AF FORM 1364, CONSENT FOR SEARCH AND SEIZURE

CONSENT FOR SEARCH AND SEIZURE		
NAME (Print or type) Gus E. Duncan	GRADE MSgt	SSN 999-88-1213
ADDRESS (Organization and station. Include ZIP Code) 72 TRS/DOAB, Tinker AFB, OK 82310		
<p>I, <u>MSgt Gus E. Duncan</u>, state that <u>SSgt Michael McKinnon</u> <sup>1</sup>  was identified to me as a <u>Security Forces Member</u>  and advised me that the nature of the offense(s) of which I am suspected (matters concerning which I may have knowledge) is / are as follows:  <u>Wrongful Possession of a Controlled Substance</u>  _____  _____</p>		
<p>I know that I have the legal right to either consent to a search, or to refuse to give my consent. I understand that if I do consent to a search, anything found in the search can be used against me in a criminal trial or in any other disciplinary or administrative procedure. I also understand that if I do not consent, a search cannot be made without a warrant or other authorization recognized in law. <u>AD</u></p>		
<p>With knowledge of the foregoing, I have decided to allow the person identified above and whomever may be designated to assist, to search the following place(s) in the <del>day</del> <sup>30</sup> time / night time  <u>My lodging room, #222, , Bldg #1234, Tinker AFB, OK and all its contents to include my vehicle, a 1962, brown in color, Chevrolet pick up truck, OK Reg #234-FED..</u>  _____  _____</p>		
<p>Before deciding to give my consent, I carefully considered this matter. I am giving my consent voluntarily and of my own free will, without having been subjected to any coercion, unlawful influence or unlawful inducement and without any promise of reward, benefit, or immunity having been made to me. The investigators have my permission to take any letters, papers, materials, articles or other property they consider to be evidence of an offense, including contraband for use as evidence in any criminal prosecution hereafter initiated. I have read and understand this entire acknowledgment of my rights and grant of my consent for search and seizure. <u>AD</u></p>		
<p>Dated this <u>9th</u> day of <u>December</u> 2000, at <u>2230 hrs, Rm 222, Tinker Lodging, Tinker</u></p>		
SIGNATURE <u>Gus E. Duncan</u>		
WITNESS <u>Michael McKinnon</u>		WITNESS <u>[Signature]</u>
<p>1. Insert "Security Policy Investigator, USAF," "AFPSI Special Agent," or other appropriate designation.  2. Insert my person; my dwelling; my apartment and storage area; my room; my footlocker; the premises; etc.  Describe in detail the property or area to be searched and its location for proper identification.</p>		

## ATTACHMENT 16

## AF FORM 3226, AUTHORITY TO APPREHEND IN PRIVATE DWELLING

AUTHORITY TO APPREHEND IN PRIVATE DWELLING	
<p>I have been informed that <u>MSgt Bud Weiser</u> (Investigator)</p> <p>is investigating the offense of <u>Assault</u>,</p> <p>a violation of the Uniform Code of Military Justice, and has requested that I authorize an apprehension of the person of</p> <p><u>SrA Jefferson, Michael L.</u> (Person) at the private dwelling located</p> <p>at <u>1212 Michigan Ave, Vance AFB, OK</u></p> <p>Having carefully considered the matters presented to me in support of the request, I am satisfied that there are reasonable grounds to believe that the offense specified above (has been) <del>(is being)</del> committed, that the Person (committed) <del>(is committing)</del> such offense and there is reason to believe the person to be apprehended (is) <del>(will be)</del> present in the dwelling described above. I am further satisfied that the Investigator is an individual authorized under the UCMJ to apprehend the</p> <p>Accordingly, <u>MSgt Bud Weiser</u> (Investigator) with the assistance of such other authorized individual or individuals as may be necessary, is hereby authorized to enter the dwelling described above and apprehend the Person.</p> <p>This authority to apprehend in a dwelling is issued by virtue of my position as a military magistrate or as commander having jurisdiction over</p> <p><u>SrA Jefferson, Michael L.</u> (Person to be apprehended) <sup>1</sup> <u>1212 Michigan Ave, Vance AFB, OK</u> (Place where the dwelling is located).</p> <p>No apprehension will be effected pursuant to the authority herein granted later than three days from this date.</p> <p>Dated this <u>8th</u> day of <u>May</u>, 19 <u>99</u> at <u>Base Legal Office, Vance AFB, OK</u></p>	
<p>CAUTION</p> <p>RECORD SHOULD BE KEPT OF THE INFORMATION GIVEN TO THE AUTHORIZING OFFICER, ON WHICH THAT OFFICER BASES THE AUTHORIZATION, FOR POSSIBLE USE IN COURTS-MARTIAL. MAKE A SUMMARY OF ORAL INFORMATION. ENSURE THAT THIS SUMMARY AND ANY WRITTEN INFORMATION RECEIVED IS PROPERLY PRESERVED. CONSULT THE STAFF JUDGE ADVOCATE.</p>	
<p>TYPED NAME, GRADE, AND FUNCTIONAL ADDRESS OF AUTHORIZING OFFICIAL</p> <p>MICHAEL D. JORDAN, Colonel, USAF Commander, 90th Fighter Training Wing Vance AFB, OK</p>	<p>SIGNATURE</p> 
<p><sup>1</sup>Apprehension authorization based on authority over the person above will apply only with respect to apprehension at off-base dwellings in a foreign country.</p>	

ATTACHMENT 17

AF FORM 3545, INCIDENT REPORT, PAGE 1

INCIDENT REPORT				ORI NUMBER		CASE NUMBER (SFAR use only)																															
<b>PRIVACY ACT STATEMENT</b>																																					
<p><b>AUTHORITY:</b> 10 U.S.C. 8013; 44 U.S.C. 3103; and EO 9397</p> <p><b>PRINCIPAL PURPOSE:</b> Used to record information and details of criminal activity which may require investigative action by commanders, supervisor, security forces, AFOSI special agents, etc. Used to provide information to the appropriate individuals within DoD organizations who ensure that proper legal and administrative action is taken.</p> <p><b>ROUTINE USES:</b> Information may be disclosed to local, county, state and federal law enforcement or investigatory authorities for investigation and possible criminal prosecution or civil court action. Information extracted from this form may be used in other related criminal and/or civil proceedings.</p> <p><b>DISCLOSURE IS VOLUNTARY:</b> SSN is used to positively identify the individual making the statement and as a conduit to check past criminal activity records.</p>																																					
<b>SECTION I. INCIDENT NOTIFICATION</b>																																					
DATE REC'D		TIME REC'D (24 Hour)		HOW COMPLAINT RECEIVED (911, radio, telephone, in person, etc.)																																	
2000 10 16		1215		TELEPHONE																																	
<b>SECTION II - OFFENSE</b>																																					
INCIDENT OCCURRED BETWEEN:		DATE		TIME (24 HOUR)		AND DATE		TIME (24 HOUR)																													
		2000 10 16		1215		2000 10 16		1235																													
OFFENDER NO.	OFFENSE IDENTIFIER	OFFENSE STATUTORY BASIS	OFFENSE RESULT	INVOLVEMENT	BIAS CODE	LOCATION/ADDRESS	IN U.S. (Y/N)	SECTOR	ON BASE (Y/N)																												
01	ASSAULT	A	B	P		RM 210, BLDG 100 LACKLAND AFB, TX 78236	Y	1	Y																												
OFFENSE STATUTORY CODES: A=UCMJ; B=NON CRIMINAL FATALITY (HIGH INTEREST); C=STATE; D=LOCAL; E=FOREIGN; F=FEDERAL, NON UCMJ																																					
OFFENSE RESULT CODES: A=ATTEMPTED; B=COMPLETED																																					
INVOLVEMENT CODES: P=PRINCIPLE; A=ACCESSORY; C=CONSPIRACY; S=SOLICIT																																					
BIAS MOTIVATION CODES:																																					
<table border="0"> <tr> <td>AV = Anti White</td> <td>AT = Anti Pacific Islander</td> <td>AY = Anti Other Religions</td> <td>AG = Anti Bisexual</td> </tr> <tr> <td>AH = Anti Black</td> <td>AZ = Anti Other Ethnicity</td> <td>AS = Anti Multi Religious Group</td> <td>AX = Unknown Bias</td> </tr> <tr> <td>AD = Anti Arab</td> <td>AR = Anti Multi Racial Group</td> <td>AA = Anti Agnostic</td> <td>BA = Anti Mental Disability</td> </tr> <tr> <td>AM = Anti Hispanic</td> <td>AO = Anti Jewish</td> <td>AW = Anti Homosexual</td> <td>BB = Anti Physical Disability</td> </tr> <tr> <td>AC = Anti American Indian</td> <td>AI = Anti Catholic</td> <td>AQ = Anti Male Homosexual</td> <td></td> </tr> <tr> <td>AB = Anti Alaskan</td> <td>AN = Anti Islamic (Moslem)</td> <td>AK = Anti Female Homosexual</td> <td></td> </tr> <tr> <td>AE = Anti Asian</td> <td>AU = Anti Protestant</td> <td>AL = Anti Heterosexual</td> <td></td> </tr> </table>										AV = Anti White	AT = Anti Pacific Islander	AY = Anti Other Religions	AG = Anti Bisexual	AH = Anti Black	AZ = Anti Other Ethnicity	AS = Anti Multi Religious Group	AX = Unknown Bias	AD = Anti Arab	AR = Anti Multi Racial Group	AA = Anti Agnostic	BA = Anti Mental Disability	AM = Anti Hispanic	AO = Anti Jewish	AW = Anti Homosexual	BB = Anti Physical Disability	AC = Anti American Indian	AI = Anti Catholic	AQ = Anti Male Homosexual		AB = Anti Alaskan	AN = Anti Islamic (Moslem)	AK = Anti Female Homosexual		AE = Anti Asian	AU = Anti Protestant	AL = Anti Heterosexual	
AV = Anti White	AT = Anti Pacific Islander	AY = Anti Other Religions	AG = Anti Bisexual																																		
AH = Anti Black	AZ = Anti Other Ethnicity	AS = Anti Multi Religious Group	AX = Unknown Bias																																		
AD = Anti Arab	AR = Anti Multi Racial Group	AA = Anti Agnostic	BA = Anti Mental Disability																																		
AM = Anti Hispanic	AO = Anti Jewish	AW = Anti Homosexual	BB = Anti Physical Disability																																		
AC = Anti American Indian	AI = Anti Catholic	AQ = Anti Male Homosexual																																			
AB = Anti Alaskan	AN = Anti Islamic (Moslem)	AK = Anti Female Homosexual																																			
AE = Anti Asian	AU = Anti Protestant	AL = Anti Heterosexual																																			
<b>LOCATION OF OFFENSE</b>																																					
<input type="checkbox"/> Exchange/Dept/Discount Store	<input type="checkbox"/> Air/Bus/Train Terminal	<input type="checkbox"/> Corrections Facility/Jail/Prison	<input type="checkbox"/> Dining Facility/Restaurant																																		
<input type="checkbox"/> Bank/Credit Union	<input type="checkbox"/> Hospital/Clinic	<input type="checkbox"/> Lake/Waterway/Ocean	<input type="checkbox"/> School (Elem, High)/College																																		
<input type="checkbox"/> NCO Club/Officer Club/Bar	<input type="checkbox"/> Training Area/Field/Woods	<input type="checkbox"/> Construction Site	<input type="checkbox"/> Specialty Store/Concessionaire																																		
<input type="checkbox"/> Highway/Road/Alley	<input type="checkbox"/> Government/Public Building	<input type="checkbox"/> Motor Pool/Parking Lot/Garage	<input type="checkbox"/> On Board Ship																																		
<input type="checkbox"/> VAQ/VQO/TLQ/Hotel	<input type="checkbox"/> Commissary/Grocery Store	<input type="checkbox"/> Service/Gas Station	<input type="checkbox"/> Other (Specify)																																		
<input type="checkbox"/> Class VI/Liquor Store	<input type="checkbox"/> Church/Synagogue/Temple	<input type="checkbox"/> Rental/Storage Facility																																			
<input type="checkbox"/> Shoppette/Convenience Store	<input checked="" type="checkbox"/> Commercial/Office Building	<input type="checkbox"/> Quarters/Dorm/BOQ/BEQ																																			
<input type="checkbox"/> Child Care Facility	<input type="checkbox"/> Recreation Area/Park	<input type="checkbox"/> Training/Service School																																			
TYPE OF CRIMINAL ACTIVITY ("X" Up to three.)								ALL ILLEGAL ENTRIES (X)																													
<input type="checkbox"/> Buying/Receiving	<input type="checkbox"/> Operating/Promoting/Assisting	<input type="checkbox"/> Forced																																			
<input type="checkbox"/> Cultivating/Manufacturing	<input type="checkbox"/> Possessing/Concealing	<input type="checkbox"/> No Force																																			
<input type="checkbox"/> Distributing/Selling	<input type="checkbox"/> Transporting/Importing	Number of Premises Entered																																			
<input type="checkbox"/> Exploiting Children	<input type="checkbox"/> Using/Consuming																																				

ATTACHMENT 18

AF FORM 3545, INCIDENT REPORT, PAGE 2

SECTION III - OFFENDER											
<input type="checkbox"/> SUSPECT					<input checked="" type="checkbox"/> SUBJECT					OFFENDER IDENTIFIER: <b>01</b>	
LAST NAME <b>BLAKE</b>			FIRST <b>SCOTT</b>		MIDDLE NAME <b>FRANCIS</b>			NAME CADENCY (Jr, Sr)		GRADE <b>E-6</b>	
ALIAS (AKA) LAST NAME <b>STINKY</b>			FIRST		DRIVER'S LICENSE NO. <b>1234567M2</b>		DRIVER'S LICENSE SOURCE <b>MISSOURI</b>				
SSN/ALIEN REGISTRATION DESIGNATION AND NUMBER (I, S, or R) <b>S345 67 8912</b>			DOB <b>1972 0102 28</b>		AGE <b>28</b>		CITY OF BIRTH <b>MIAMI</b>		STATE OF BIRTH <b>FL</b>	COUNTRY OF BIRTH <b>USA</b>	
CURRENT STREET ADDRESS (Include Apartment Number) <b>9211 W. STATE ST.</b>					CITY <b>SAN ANTONIO</b>			STATE <b>TX</b>		ZIP <b>78236</b>	
ORGANIZATION/EMPLOYER/SPONSOR'S NAME AND GRADE <b>37 SVS, LACKLAND AFB, TX</b>							WORK TELEPHONE <b>3-0131</b>		HOME TELEPHONE <b>622-5555</b>		
SERVICE							COMPONENT				
<input type="checkbox"/> Army		<input type="checkbox"/> Marine Corp		<input type="checkbox"/> Public Health			<input checked="" type="checkbox"/> Regular				
<input type="checkbox"/> Navy		<input type="checkbox"/> Coast Guard					<input type="checkbox"/> Reserve				
<input checked="" type="checkbox"/> Air Force		<input type="checkbox"/> National Oceanic and Atmospheric Administration					<input type="checkbox"/> National Guard				
PERSONAL STATUS				HAIR COLOR <b>BROWN</b>		EYE COLOR <b>BROWN</b>		HEIGHT <b>69"</b>		WEIGHT <b>175</b>	
<input type="checkbox"/> Federal Civil Servant		<input type="checkbox"/> Uniformed Service Retired		HOW DRESSED (Military or Civilian, and condition of clothing.)							
<input type="checkbox"/> Federal Contractor		<input type="checkbox"/> Unknown									
<input type="checkbox"/> Uniformed Service Family Member		<input type="checkbox"/> Other (Specify)									
IDENTIFYING MARKS (T = TATOO, S = SCAR, M = MARK)											
Scalp		Neck		Left Lower Arm		<b>S</b> Right Hand		Left Hip		Right Lower Leg	
Face		Right Shoulder		Right Lower Arm		Back		Right Hip		Left Ankle	
Left Eye		Left Shoulder		Left Wrist		Chest		Left Upper Leg		Right Ankle	
Right Eye		Left Upper Arm		Right Wrist		Abdomen		Right Upper Leg		Left Foot	
Teeth Set		Right Upper Arm		Left Hand		Buttocks		Left Lower Leg		Right Foot	
IDENTIFYING MARK DESCRIPTION (i.e. Flower, 3-Inch scar, etc.) <b>INDIVIDUAL HAS APPROXIMATE 3 INCH SCAR ON BACK OF RIGHT HAND STARTING FROM THE RING FINGER EXTENDING TOWARDS THE WRIST</b>											
RACE			SEX			APPREHENSION DATE <b>2000 10 16</b>					
<input type="checkbox"/> American Indian		<input checked="" type="checkbox"/> White		Male			TYPE OF APPREHENSION/DETENTION				
<input type="checkbox"/> Asian/Pacific Islander		<input type="checkbox"/> Hispanic		Female							
<input type="checkbox"/> Black		<input type="checkbox"/> Unknown		Unknown			DETENTION TYPE				
<input type="checkbox"/> NON-UNIFORMED SERVICE			<input checked="" type="checkbox"/> UNIFORMED SERVICE.								
JUVENILE DISPOSITION (If applicable.)						MULTIPLE INCIDENTS CLEARED					
HANDLED WITHIN DEPARTMENT						FIRST RECORD OF MULTIPLE					
REFERRED TO OTHER AGENCIES						MULTIPLE RECORDS					
OFFENDER USED (X)		TYPE WEAPON/FORCE USED (X up to Three) <i>Firearm Codes: A = Fully automatic, M = Manual, S = Semi-automatic.</i>									
<input checked="" type="checkbox"/> Alcohol		<input type="checkbox"/> Handgun		<input type="checkbox"/> Blunt Object		<input type="checkbox"/> Explosives		<input type="checkbox"/> Firearm Unknown		<input checked="" type="checkbox"/> Other (Specify) <b>LEFT HAND FIST</b>	
<input type="checkbox"/> Drugs/Narcotics		<input type="checkbox"/> Rifle		<input type="checkbox"/> Motor Vehicle		<input type="checkbox"/> Fire/Incendiary		<input type="checkbox"/> Knife/Cutting Tool			
<input type="checkbox"/> Computer Equipment		<input type="checkbox"/> Shotgun		<input type="checkbox"/> Personal Weapon		<input type="checkbox"/> Narcotic/Drug		<input type="checkbox"/> Club/Blackjack/Brass Knuckles			
<input type="checkbox"/> Not applicable		<input type="checkbox"/> Bow and Arrow/Crossbow		<input type="checkbox"/> Poison		<input type="checkbox"/> Asphyxiation		<input type="checkbox"/> Unarmed			

ATTACHMENT 19

AF FORM 3545, INCIDENT REPORT, PAGE 3

SECTION IV - VICTIM, WITNESS, COMPLAINANT									
<input checked="" type="checkbox"/> VICTIM			WITNESS			COMPLAINANT			
DD2701 ISSUED?		<input checked="" type="checkbox"/> YES		NO		VICTIM IDENTIFIER: 01			
LAST NAME CARLSON		FIRST RYAN		MI B	GRADE E5	SSN 678912345	DOB 19650210	AGE 35	
CURRENT STREET ADDRESS (Include Apartment Number) 124 NORTHWESTERN AVE					CITY SAN ANTONIO		STATE TX	ZIP CODE 78234	
ORGANIZATION/EMPLOYER/SPONSOR'S NAME AND GRADE 37 SVS, LACKLAND AFB, TX						WORK TELEPHONE 3-0137	HOME TELEPHONE 622-1133		
SERVICE						COMPONENT			
<input type="checkbox"/> Army		<input type="checkbox"/> Marine Corp		<input type="checkbox"/> Public Health		<input checked="" type="checkbox"/> Regular			
<input type="checkbox"/> Navy		<input type="checkbox"/> Coast Guard				<input type="checkbox"/> Reserve			
<input checked="" type="checkbox"/> Air Force		<input type="checkbox"/> National Oceanic and Atmospheric Administration				<input type="checkbox"/> National Guard			
TYPE OF VICTIM		PERSONAL STATUS			VICTIM'S RACE			VICTIM'S SEX	
<input checked="" type="checkbox"/> Individual		<input type="checkbox"/> Government		<input type="checkbox"/> Federal Civil Servant		<input type="checkbox"/> Uniformed Service Retired		<input checked="" type="checkbox"/> American Indian	
<input type="checkbox"/> Business		<input type="checkbox"/> Religious Org'n		<input type="checkbox"/> Federal Contractor		<input type="checkbox"/> Unknown		<input checked="" type="checkbox"/> White	
<input type="checkbox"/> Financial		<input type="checkbox"/> Society/Public		<input type="checkbox"/> Uniformed Service Family Member		<input type="checkbox"/> Other (Specify)		<input type="checkbox"/> Hispanic	
								<input type="checkbox"/> Black	
								<input type="checkbox"/> Unknown	
								<input type="checkbox"/> Unknown	
RELATIONSHIP OF VICTIM TO OFFENDER (If more than one offender enter Offender Number)									
<input type="checkbox"/> Spouse		<input type="checkbox"/> Grandparent		<input type="checkbox"/> Stepsibling		<input type="checkbox"/> Babysittee (Baby)		<input type="checkbox"/> Employee	
<input type="checkbox"/> Common Law Spouse		<input type="checkbox"/> Grandchild		<input type="checkbox"/> Extended Family Member		<input type="checkbox"/> Love Interest		<input type="checkbox"/> Employer	
<input type="checkbox"/> Parent		<input type="checkbox"/> Parent In-Law		<input checked="" type="checkbox"/> Acquaintance		<input type="checkbox"/> Child of Love Interest		<input type="checkbox"/> Otherwise Known	
<input type="checkbox"/> Sibling		<input type="checkbox"/> Stepparent		<input type="checkbox"/> Friend		<input type="checkbox"/> Homosexual Relationship		<input type="checkbox"/> Stranger	
<input type="checkbox"/> Child		<input type="checkbox"/> Stepchild		<input type="checkbox"/> Neighbor		<input type="checkbox"/> Ex-Spouse		<input type="checkbox"/> Relationship Unknown	
JUSTIFIABLE HOMICIDE CIRCUMSTANCES CODES (Select from TABLE 1 below for Victims only.)									
INJURY TYPE CODES (Select from TABLE 2 below for Victims only.) M									
AGGRAVATED ASSAULT/HOMICIDE CIRCUMSTANCE CODES (Select from TABLE 3 below for Victims only.)									
TABLE 1 - JUSTIFIABLE HOMICIDE CIRCUMSTANCES CODES					TABLE 2 - INJURY TYPE CODES				
A = Criminal Attacked Police Officer and that Officer Killed Criminal					B = Apparent Broken Bones				
B = Criminal Attacked Police Officer and Criminal Killed by Another Police Officer					I = Possible Internal Injury				
C = Criminal Attacked a Civilian					L = Severe Laceration				
D = Criminal Attempted Flight from a Crime					M = Apparent Minor Injury				
E = Criminal Killed in Commission of a Crime					O = Other Major Injury				
F = Criminal Resisted Arrest					T = Loss of Teeth				
G = Unable to Determine					U = Unconsciousness				
X = None					X = None				
TABLE 3 - AGGRAVATED ASSAULT/HOMICIDE CIRCUMSTANCES CODES									
01 = Argument			06 = Domestic Quarrel			30 = Child Playing with Weapon			
02 = Assault on LE Officer			07 = Mercy Killing			31 = Gun-Cleaning Accident			
03 = Drug Dealing			08 = Other Felony Involved			32 = Hunting Accident			
04 = Gangland			20 = Criminal Killed by Private Citizen			33 = Other Negligent Weapon Handling			
05 = Juvenile Gang			21 = Criminal Killed by Police Officer			34 = Other Negligent Killing			
99 = None									



ATTACHMENT 21

AF FORM 3545, INCIDENT REPORT, PAGE 5

SECTION VIII - COMMANDER'S SECTION									
FROM			THRU				TO		
SUSPECT/ SUBJECT/ OFFENDER LAST NAME			FIRST		MI	GRADE		SSN	
REFERRALS									
TYPE		REFERRAL DATE	RESPONSE DATE		TYPE		REFERRAL DATE	RESPONSE DATE	
Family Advocacy					Drug/Alcohol Abuse Office				
Equal Opportunity					Legal Office				
Mental Health					Relief Agency				
					Special Referral (Explain)				
COMMANDER'S ACTION TAKEN			NO ACTION TAKEN						
ADMINISTRATIVE ACTION									
TYPE ACTION			INITIATION DATE	COMPLETE DATE	TYPE ACTION			INITIATION DATE	COMPLETE DATE
Withholding of Privileges					Clearance Revocation				
Adverse Performance Evaluation					Control Roster				
Mandatory Reassignment					Promotion Revocation				
Transfer					Resignation				
Adverse Record Entries					Retirement				
Denial of Reenlistment or Continuation					Retirement at Lower Grade of _____				
Withholding of Promotion					Transfer to Inactive Reserve Status				
Delay of Promotion					Military Occupational Specialty Reclassification				
Counseling			ORAL	WRITTEN	IN PIF, UIR, SR				
Non-Punitive Admonition or Reprimand			ORAL	WRITTEN	IN PIF, UIR, SR				
Administrative Separation			HONORABLE	GENERAL	UOTHC				
Administrative Separation in lieu of trial			HONORABLE	GENERAL	UOTHC				
NON-JUDICIAL ACTION									
INITIATION DATE:			APPEAL DATE:			COMPLETE DATE:			
COMPANY GRADE		FIELD GRADE	GENERAL OFFICER		GENERAL COURT-MARTIAL CONVENING AUTHORITY			PRINCIPAL ASSISTANT	
TYPE ACTION			AMOUNT			SUSPENSION/VACATION			
REDUCTION			TO:						
FORFEITURE			TOTAL:						
CORRECTIONAL CUSTODY			DAYS:						
RESTRICTION/ARREST			DAYS:						
EXTRA DUTIES			DAYS:						
REPRIMAND			YES	NO					
JUDICIAL ACTION									
REFERRED TO COURT-MARTIAL					REMANDED TO CIVILIAN CRIMINAL COURT				
SUMMARY COURT-MARTIAL			SPECIAL COURT-MARTIAL			GENERAL COURT-MARTIAL			
PENDING	TRIAL COMPLETED		PENDING	TRIAL COMPLETED		PENDING	TRIAL COMPLETED		
CIVILIAN CRIMINAL COURT DISPOSITION									
GUILTY			NOT GUILTY			DEFERRED		NOLO CONTENDERE	
CIVILIAN CRIMINAL OFFENSE CATEGORY									
FELONY					MISDEMEANOR				
CIVILIAN COURT LOCATION ZIP CODE					CIVILIAN COURT LOCATION COUNTRY CODE				
COMMANDER'S COMMENTS									
TYPED NAME AND GRADE OF COMMANDING OFFICER					SIGNATURE			DATE	

## ATTACHMENT 22

## AF FORM 3545, INCIDENT REPORT, PAGE 6

## SECTION IX - NARRATIVE

At approximately 1215 hours, 16 Oct 2000, I was briefed and dispatched to an altercation in progress at Bldg #100, Room #210/37 SVS Dormitory. Upon arrival I heard yelling coming from the second floor of the Bldg. Upon arrival of TSgt Glover/Police 3, we entered the dormitory. Upon arrival to Room #210, we heard that a verbal altercation was in progress. Upon entering the room, at approximately 1235, 10 Oct 00, GLOVER and I witnessed BLAKE/Subject strike CARLSON/Victim in the right eye with a closed left fist. Once the individuals were separated, I advised BLAKE he was being apprehended for assault. CARLSON's eye revealed a slight puffiness. CARLSON related he was okay and did not require medical attention. At approximately 1240 hours, Glover initiated a search of BLAKE which produced negative results. I then transported BLAKE back to the Security Forces Desk and GLOVER transported CARLSON to the desk. CARLSON accomplished an AF Form 1168. CARLSON related that at approximately 1200 hours, 10 Oct 00, BLAKE entered his dormitory room and began yelling at him, accusing him of stealing his girlfriend. CARLSON further related that BLAKE was very irate and when the Security Forces arrived, he was struck in the right eye by BLAKE with his left fist. GLOVER took two (2) poloroid color photographs of the injury sustained to CARLSON's right eye and accomplished an AF Form 52. CARLSON was issued a DD form 2701 and departed the Security Forces Desk. At approximately 1315 hours, 10 Oct 00, I advised BLAKE of his rights, via AF Form 1168, as witnessed by GLOVER. BLAKE acknowledged his rights, declined legal counsel and declined to make a written statement. At approximately 1345 hours, 10 Oct 00, MSgt DOWNEY/37 SVS First Sergeant arrived and receipted for BLAKE, via DD form 2708. GLOVER and I both accomplished AF Forms 1168 stating we witnessed BLAKE striking CARLSON in the eye. NOTIFICATIONS: MSgt Grady/SFO, SrA Jones/SFOI and Capt Henson/SJA.

*Bruce A Spurling*  
BRUCE A. SPURLING, MSgt, USAF  
Patrolman, SFOA

*Richard L. Smith*  
RICHARD L. SMITH, MSgt, USAF  
Flight Sergeant, SFOA

ATTACHMENT 23

AF FORM 3907, SECURITY FORCES FIELD INTERVIEW DATA

SECURITY FORCES FIELD INTERVIEW DATA											
PRIVACY ACT STATEMENT											
<small>AUTHORITY: 18 U.S.C. 1382                  PRINCIPAL PURPOSE(S): Used to record routine contact between security force member and the public. Data obtained from the form is compared against reported criminal activity.                  ROUTINE USE: Information may be disclosed to other federal, state, county and local law enforcement/investigative authorities for investigation and possible criminal prosecution or civil court action.                  DISCLOSURE IS MANDATORY: Failure to disclose the information and SSM may result in the individual losing access to the installation, and may subject the individual to other administrative or disciplinary action by military or civil authorities.</small>											
NAME	STORZILLO, ANTHONY M.		NICKNAME	TONY OR T-MAN		DOB	3 OCT 83		PLACE OF BIRTH	CARSWELL AFB, TX	
ADDRESS	201 TINKER DRIVE					TELEPHONE NUMBER (including Area Code)	(210) 444-6789				
AGE	17	RACE	CAUC	SEX	M	HEIGHT	5'7"	WEIGHT	175	BUILD	MEDIUM
COMPLEXION	FAIR		HAIR	BROWN		EYES	BROWN		MARKS OR SCARS	NONE VISIBLE	
HOW DRESSED	BAGGY BLUE JEANS, WHITE POLO SHIRT										
OCCUPATION AND EMPLOYER OR SCHOOL ATTENDED AND GRADE	O'CONNOR HIGH SCHOOL 10TH										
DRIVERS' LICENSE NUMBER	1347776		STATE	TX		TYPE	C		MAKE OF CAR	FORD	
YEAR	90		TYPE	ZOR		COLOR	PROBERED		LICENSE NUMBER	B52 LLL	
STATE	TX		STATE	TX		DATE OF CONTACT	15 DEC 00		TIME OF CONTACT	0140	
NAME OF PARENT OR LOCAL REFERENCE	WALTER FILIPIAK, HQ AFSFC, D/P #3-0898										
LOCATION OF CONTACT	PARKING LOT OF BASE EXCHANGE										
ASSOCIATES WITH CONTACT	NONE										
REASON FOR CONTACT	INDIVIDUAL WAS ACTING SUSPICIOUS, LOOKING IN WINDOWS OF CARS										
DISPOSITION OF CONTACT	INDIVIDUAL WAS TAKEN HOME, TURNED OVER TO SPONSOR										
PRINTED OR TYPED NAME OF SECURITY FORCE MEMBER	SRA JAMES L. WHITE					SIGNATURE OF REPORTING OFFICER	<i>James L. White</i>				
DATE SIGNED	15 DEC 00										

## ATTACHMENT 24

## DD FORM 460, PROVISIONAL PASS

PROVISIONAL PASS		
ISSUED TO <i>JOHN GILLESPIE</i>	SSAN & SERVICE NO. <i>111-22-3333</i>	GRADE/RATE <i>PVT</i>
ORGANIZATION <i>419 SIGNAL CORPS</i>		
STATION <i>FT LEONARD-WOOD, MO.</i>		
FROM (Location) <i>RANDOLPH AFB, TX</i>	TO (Location) <i>FT LEONARD-WOOD, MO</i>	
ISSUED AT <i>12 SFS, RANDOLPH AFB, TX</i>	DATE <i>14 FEB 01</i>	TIME <i>1000</i>
ISSUED BY (Name, Grade/Rate, Organization) <i>VICTOR MOSBY, TSGT, 12 SFS</i>		

FOR FILE

DD FORM 460  
1 MAR 51

ORDER:	
The bearer is ordered to proceed by the most direct route on the first available transportation, and to report on arrival to his commanding officer.	
ACKNOWLEDGMENT:	
I hereby acknowledge receipt of the above order. I understand that: (1) refusal or failure to obey this order will subject me to trial by courts-martial, and (2) this order in no way mitigates or terminates the liability for disciplinary action involved in any previous actions by me.	
SIGNATURE <i>John Gillespie</i>	DATE <i>14 FEB 01</i>

ATTACHMENT 25

DD FORM 1408, ARMED FORCES TRAFFIC TICKET, WHITE COPY FRONT

ARMED FORCES TRAFFIC TICKET				<input type="checkbox"/> WARNING (See Remarks below)	NAME (Last, First, Middle Initial)
The person named below committed traffic violation set forth at the time and location, and on date shown, and was issued this traffic ticket.					
1. NAME (Last, First, Middle Initial) <b>Lafond, Mark N.</b>					
2. RANK / GRADE <b>SSgt/E-5</b>		3. DATE OF BIRTH <b>26 Aug 70</b>	4. SOCIAL SECURITY NO. <b>123-45-6789</b>		
5. ORGANIZATION OR ADDRESS <b>8354th SVS, Hurlburt Fld., FL</b>					
6. DRIVER LICENSE NUMBER <b>M500-506-388-0</b>			7. ISSUING AUTHORITY (State or Military) <b>Florida</b>		
8. MAKE OR TYPE OF VEHICLE <b>Ford F-150</b>		9. STATE LICENSE OR REGIS NO. <b>FSU-930/Florida</b>		10. INSTL TAG NO. <b>NIF 040 Hurlburt Fld</b>	
11. DATE (Day-month-year) <b>13 Dec 98</b>		12. TIME <b>1615</b>	13. LOCATION <b>Forest Pass St.</b>		
14. <input checked="" type="checkbox"/> SPEED OVER LIMIT ( 26 mph in a 15 mph zone) <input checked="" type="checkbox"/> 5 - 10 MPH <input checked="" type="checkbox"/> 11 - 15 MPH <input type="checkbox"/> OVER 15 MPH					
V I O L A T I O N S					
IMPROPER LEFT TURN →		NO SIGNAL	CUT CORNER	FROM WRONG LANE	
IMPROPER RIGHT TURN →		NO SIGNAL	INTO WRONG LANE	FROM WRONG LANE	
DISOBEYED TFC SIGNAL (When light turned red) →		PAST MIDDLE INTERSECTION	MIDDLE OF INTERSECTION	HAD NOT REACHED INTERSECTION	
DISOBEYED STOP SIGN →		STOPPED WRONG PLACE	FAILED TO STOP	ROLLED / SPED THROUGH	
IMPROPER PASSING AND LANE USAGE →		AT INTERSECTION	CUT IN	WRONG SIDE OF PAVEMENT	
		BETWEEN TFC	ON RIGHT	ON HILL	
		LANE STRADDLING	WRONG LANE	ON CURVE	
FOL TOO CLOSELY		OTHER VIOLATIONS (Describe)			
FAILURE TO YIELD					
<b>PARKING</b>					
		OVERTIME		DOUBLE PARKING	
		PROHIBITED AREA		OTHER (Describe in Remarks)	
CONDITIONS THAT INCREASED SERIOUSNESS OF VIOLATION		SLIPPERY PAVEMENT	<input checked="" type="checkbox"/> RAIN	AREA	TRAFFIC ACCIDENT
			SNOW	BUSINESS	TYPE OF ACCIDENT:
			ICE	INDUSTRIAL	PD   PI
		DARKNESS	NIGHT	RURAL	FATAL
			FOG	SCHOOL	PEDESTRIAN
			SNOW	<input checked="" type="checkbox"/> RESIDENTIAL	VEHICLE
		OTHER TRAFFIC PRESENT	<input checked="" type="checkbox"/> CROSS ONCOMING	HIGHWAY TYPE	HIT FIXED OBJ
			PEDESTRIAN	<input checked="" type="checkbox"/> 2 - LANE	RIGHT ANGLE
			SAME DIRECTION	3 - LANE	SIDESWIPE
			PEDESTRIAN	4 - LANE	REAR END
		CAUSED PERSON TO DODGE	DRIVER	4 - LANE DIVIDED	INTERSECTION
			JUST MISSED ACDT		HEAD ON
					RAN OFF ROAD
15. REMARKS <b>Speed was clocked using Speedo Radar Gun #4, SN 3456. Gun was calibrated.</b>					
16. NAME OF PERSON ISSUING TRAFFIC TICKET <b>Joe B. Cool</b>					
17. ORGANIZATION AND INSTALLATION <b>8354th SFS, Hurlburt Fld., FL</b>				18. RANK / GRADE <b>SSgt/E-5</b>	
DD Form 1408, DEC 87				CO of violator or appropriate civil agency	
Previous edition is obsolete.				97L21064	
				<b>1</b>	

TICKET NUMBER  
**B210951**

ATTACHMENT 26

DD FORM 1408, ARMED FORCES TRAFFIC TICKET, YELLOW COPY REVERSE

ISSUING AUTHORITY'S NOTES	
<p style="text-align: center;"><b>INSTRUCTIONS</b></p> <p>Note facts and circumstances in addition to those marked on the face of the traffic ticket that will assist you in testifying before a court or providing additional information as required, e.g..</p> <p>(1) Any action of violator which increased the hazard of the violation;                      (2) Where violation was observed and where contact was made;                      (3) Total distance traveled during pursuit;                      (4) Condition and attitude of violator and instructions to violator as to reporting.</p>	
<p>1. None.</p> <p>2. Observed at the intersection of Forest Pass and Forest Bluff, contact made at Forest Pass and Forest Hollow.</p> <p>3. Traveled 5/10th of a mile.</p> <p>4. Instructed the violator to report this citation to their First Sergeant or Commander on the next duty day.</p>	
WITNESSES	
VEHICLE DEFECTS	
	BRAKES
	HEADLIGHTS
	TAILLIGHTS
	STOPLIGHTS
	WINDSHIELD WIPER
	HORN
	TIRES
	OTHER

**ATTACHMENT 27**

**DD FORM 1408, ARMED FORCES TRAFFIC TICKET, PINK COPY REVERSE**

<b>INSTRUCTIONS TO VIOLATOR</b>	
<input checked="" type="checkbox"/>	Inform your commanding officer, supervisor, or sponsor of this violation. The original copy of this traffic ticket will be forwarded in accordance with established procedures.
<input checked="" type="checkbox"/>	You may obtain further information concerning this traffic ticket from the installation law enforcement office.
<input checked="" type="checkbox"/>	<b>SPECIAL INSTRUCTIONS</b>
<p><b>Report this violation to your First Sergeant or Commander on your next duty day.</b></p>	
<b><u>Privacy Act Statement</u></b>	
<b><u>AUTHORITY:</u></b>	Title 10 USC Section 301(g); Title 5 USC Section 2951; E.O. 9397 dated November 22, 1943 (SSN)
<b><u>PRINCIPLE PURPOSE:</u></b>	The Social Security Number (SSN) is used for Law Enforcement purposes as an additional means of identification of subjects, witnesses or complaints.
<b><u>ROUTINE USES:</u></b>	The SSN provides an interface with the standard Installation/Division System and is a major item used in processing machine record and output sequence for Military Police Management Information Systems. Also, provides the unit command, provost marshal, and the individual with a copy of notices of traffic violations committed on an installation (information is extracted from this form and recorded on Driver Record/Vehicle Registration). It is also used for recording action taken by unit commander or an offender.
<b><u>DISCLOSURE:</u></b>	Voluntary.

ATTACHMENT 28

DD FORM 1408, ARMED FORCES TRAFFIC TICKET, BACK OF COPY 1

REQUEST FOR REPORT OF ACTION TAKEN ON TRAFFIC VIOLATION		19. DATE	
When returning Report of Action Taken, cross-through this request.			
20. TO		21. FROM	
22. NAME OF VIOLATOR		23. ORGANIZATION	
The individual named above was issued this traffic ticket for the violation indicated on the reverse. Records indicate that previous traffic violations have been charged against this person.			
For this violation, traffic points are assessable. There is a total of _____ points previously recorded against this person's driving record.			
The report of action taken (below) will be completed and returned by:			
(fold)		(fold)	
REPORT OF ACTION TAKEN ON TRAFFIC VIOLATION		24. DATE	
The circumstances relating to the violation charged on the reverse have been reviewed and the action shown below has been taken.			
25. NAME OF VIOLATOR		26. ORGANIZATION	
ADMIN		NONJUDICIAL ART (S UCMJ)	PENDING
		JUDICIAL	COMPLETED
27. REMARKS			
28. SIGNATURE		29. RANK/GRADE	
When report is completed, fold as indicated with names of addressees facing out.			
(fold)		(fold)	
30. THROUGH		31. FROM	
32. TO			

## ATTACHMENT 29

## DD FORM 1805, UNITED STATES DISTRICT COURT VIOLATION NOTICE, FRONT

Loc. Code <b>1</b>		<b>United States District Court Violation Notice</b>		
Violation No. <b>2 R006405</b>		Print Officer Name <b>3</b>		
		Officer No. <b>4</b>		
YOU ARE CHARGED WITH THE FOLLOWING VIOLATION				
Date and Time of Offense <b>5</b>		Offense Charged <b>6</b>		
Place of Offense <b>7</b>				
Offense Description <b>8</b>				
Defendant's Last Name <b>9</b>		First Name <b>10</b>	M.I. <b>11</b>	
Street Address <b>12</b>				
City <b>13</b>		State <b>14</b>	Zip Code <b>15</b>	Date of Birth <b>16</b>
Driver's License No. <b>17</b>		D.L. State <b>18</b>	Social Security No. <b>19</b>	
VEHICLE DESCRIPTION				
Vehicle Tag No. <b>20</b>	Vehicle Tag State <b>21</b>	Year <b>22</b>	Vehicle Make <b>23</b>	Vehicle Color <b>24</b>
A. <input type="checkbox"/> YOU MUST APPEAR IN COURT. SEE INSTRUCTIONS.				
B. <input checked="" type="checkbox"/> YOU MUST MARK ONE OF THE TWO CHOICES BELOW AND MAIL THIS FORM WITHIN 21 DAYS. SEE INSTRUCTIONS.				
<b>25</b> I wish to terminate this matter by paying the collateral shown below, enclosed.				
I plead not guilty and promise to appear as required.				
YOUR COURT DATE				
Court Address <b>26</b>			Date <b>27</b>	
			Time <b>28</b>	
Collateral (Fine) <b>29</b>		For payment by credit card, SEE INSTRUCTIONS.		

R006405

DD FORM 1805, SEP 1998 Original - CVB Copy Previous edition is obsolete.  
(Accountable upon issuance to the offender and until passed to the Appropriate Central Violations Bureau (Magistrate Court).)

ATTACHMENT 30

DD FORM 1805, UNITED STATES DISTRICT COURT VIOLATION NOTICE, REVERSE

STATEMENT OF PROBABLE CAUSE  
(For issuance of an arrest warrant or summons)

I state that on 30, 31 while exercising my duties as a  
law enforcement officer in the 32 District of 33

[Lined area for providing details of the statement of probable cause]

- 34 The foregoing statement is based upon:
- my personal observation
  - my personal investigation
  - information supplied to me from my fellow officer's observation
  - other (explain above)

I declare under penalty of perjury that the information which I have set forth above and on the face of this violation notice is true and correct to the best of my knowledge.

Executed on: 35  
Date Officer's Signature

Probable cause has been stated for the issuance of a warrant.

Executed on: 36  
Date U.S. Magistrate Judge

## ATTACHMENT 31

## DD FORM 1920, ALCOHOLIC INFLUENCE REPORT, FRONT

ALCOHOLIC INFLUENCE REPORT					
INSTALLATION <i>BROOKS AFB, TX</i>		VIOLATION REPORT NO.		ACCIDENT REPORT NO.	
DATE, TIME AND LOCATION OF ACCIDENT OR INCIDENT <i>20 NOV 00, 0120, ENLISTED CLUB PARKING LOT</i>		DATE AND TIME IN CUSTODY <i>20 NOV 00, 0230</i>		APPREHENDING OFFICER <i>55GT JAMES L. WOOD</i>	
NAME OF SUBJECT <i>DOVER, BENJAMIN P.</i>		GRADE/CATEGORY <i>AIC</i>		SSN <i>123-45-6789</i>	
UNIT OF ASSIGNMENT/ADDRESS <i>519 FTW, BROOKS AFB, TX</i>				<input checked="" type="checkbox"/> DRIVER <input type="checkbox"/> PASSENGER <input type="checkbox"/> PEDESTRIAN	
AGE <i>21</i>	SEX <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female	APPROX. WEIGHT <i>160</i>	OPERATOR'S LICENSE NO. <i>3456789</i>	STATE <i>MARYLAND</i>	
Check all applicable boxes describing conditions observed, i.e., more than one box may be checked to describe conditions observed.					
SECTION I - OBSERVATIONS					
MADE BY (Name, grade, SSN & organization) <i>JAMES L. WOOD 111-22-3333 519 SFS SSGT</i>			WITNESSED BY (Name, grade, SSN & organization) <i>RONALD D. RUCKER 444-55-6711 519 SFS SRA</i>		
CLOTHES (Describe type & color)	HAT OR CAP <i>NONE</i>				
	JACKET OR COAT <i>NONE</i>				
	SHIRT OR DRESS <i>BLACK T-SHIRT WITH BEAVIS AND BUTTHEAD LOGO</i>				
	PANTS OR SKIRT <i>BLUE JEANS</i>				
	CONDITION <input checked="" type="checkbox"/> Soiled <input type="checkbox"/> Mussed <input type="checkbox"/> Disorderly <input type="checkbox"/> Disarranged <input type="checkbox"/> Orderly		DESCRIBE <i>SHIRT HAS WHITE SWEAT STAINS</i>		
BREATH	ODOR OF ALCOHOLIC BEVERAGE <input type="checkbox"/> Strong <input checked="" type="checkbox"/> Moderate <input type="checkbox"/> Faint <input type="checkbox"/> None				
ATTITUDE	<input type="checkbox"/> Excited <input checked="" type="checkbox"/> Hilarious <input checked="" type="checkbox"/> Talkative <input type="checkbox"/> Carefree <input type="checkbox"/> Sleepy <input type="checkbox"/> Profanity <input type="checkbox"/> Combative <input type="checkbox"/> Indifferent <input type="checkbox"/> Insulting <input type="checkbox"/> Cocky <input type="checkbox"/> Cooperativ <input type="checkbox"/> Polite				
UNUSUAL ACTIONS	<input type="checkbox"/> Hiccoughing <input type="checkbox"/> Belching <input type="checkbox"/> Vomiting <input type="checkbox"/> Fighting <input type="checkbox"/> Crying <input checked="" type="checkbox"/> Laughing				
SPEECH	<input type="checkbox"/> Not understandable <input type="checkbox"/> Mumbled <input type="checkbox"/> Slurred <input type="checkbox"/> Mush Mouthed <input type="checkbox"/> Confused <input type="checkbox"/> Thick Tongued <input type="checkbox"/> Stuttered <input type="checkbox"/> Accent <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Good				
SPONTANEOUS ACTS (Statements, walking, turning, etc.) <i>THE SUBJECT STATED "I ONLY HAD A FEW BREWSKI"</i>					
INDICATE BRIEFLY WHAT FIRST LED YOU TO SUSPECT ALCOHOLIC INFLUENCE <i>SUBJECT DROVE HIS VEHICLE OVER CURB WHEN EXITING ENLISTED CLUB PARKING LOT</i>			SIGNS OR COMPLAINT OF ILLNESS OR INJURY <i>NONE</i>		
SECTION II - PERFORMANCE TESTS (Warning of rights in accordance with separate departmental policy is required for military personnel)					
ADMINISTERED BY (Name, grade, SSN & organization) <i>JAMES L. WOOD 111-22-3333, SSGT, 519 SFS</i>				DATE & TIME TESTS PERFORMED <i>20 NOV 00, 0249</i>	
BALANCE	<input type="checkbox"/> Falling <input type="checkbox"/> Needed Support <input checked="" type="checkbox"/> Wobbling <input type="checkbox"/> Swaying <input type="checkbox"/> Unsure <input type="checkbox"/> Sure				
WALKING	<input type="checkbox"/> Falling <input type="checkbox"/> Staggering <input checked="" type="checkbox"/> Stumbling <input type="checkbox"/> Swaying <input type="checkbox"/> Unsure <input type="checkbox"/> Sure				
TURNING	<input type="checkbox"/> Falling <input type="checkbox"/> Staggering <input type="checkbox"/> Hesitant <input checked="" type="checkbox"/> Swaying <input checked="" type="checkbox"/> Unsure <input type="checkbox"/> Sure				
FINGER TO NOSE	RIGHT <input type="checkbox"/> Hesitant <input type="checkbox"/> Completely missed <input type="checkbox"/> Sure		LEFT <input type="checkbox"/> Hesitant <input type="checkbox"/> Completely missed <input type="checkbox"/> Sure		
COINS	<input type="checkbox"/> Unable <input type="checkbox"/> Fumbling <input type="checkbox"/> Slow <input type="checkbox"/> Sure <input type="checkbox"/> Other		BALANCE DURING COIN TEST		
ABILITY TO UNDERSTAND INSTRUCTIONS <input type="checkbox"/> Poor <input checked="" type="checkbox"/> Fair <input type="checkbox"/> Good	EFFECTS OF ALCOHOL <input type="checkbox"/> Extreme <input checked="" type="checkbox"/> Obvious <input type="checkbox"/> Slight <input type="checkbox"/> None ABILITY TO DRIVE <input checked="" type="checkbox"/> Unfit <input type="checkbox"/> Fit				
REMARKS					

ATTACHMENT 32

DD FORM 1920, ALCOHOLIC INFLUENCE REPORT, REVERSE

SECTION III - INTERVIEW (Warning of rights in accordance with separate departmental policy is required for all personnel)				
Were you operating a vehicle? <u>YES</u> Where were you going? <u>BACK TO THE DORM</u>				
What street or highway were you on? <u>I'M NOT SURE</u> Direction of travel? <u>NORTH</u>				
Where did you start from? <u>CLUB</u> What time did you start? <u>MIDNIGHT</u> What time is it now? <u>I DON'T HAVE A WATCH</u>				
What city (county) are you in now? <u>TEXAS</u> What is the date? <u>20 NOV</u> What day of the week is it? <u>SATURDAY</u>				
INTERVIEWER TO FILL IN ACTUAL	TIME <u>0300</u>	DAY <u>SATURDAY</u>	DATE <u>20 NOV 00</u>	INTERVIEWER'S NAME <u>5SGT JAMES L. WOOD</u>
When did you last eat? <u>LUNCH</u> What did you eat? <u>BURGER</u>				
What were you doing during the last three hours? <u>PLAYING VIDEO GAMES</u>				
Have you been drinking? <u>YES</u> What? <u>BEER</u> How much? <u>A FEW</u> Where? <u>CLUB</u>				
Time started? <u>2200</u> Time stopped? <u>MIDNIGHT</u> Are you under the influence of an alcoholic beverage now? <u>NOT REALLY</u>				
What is your occupation? <u>CREW CHIEF</u> When did you last work? <u>YESTERDAY</u>				
Do you have any physical defects? <u>NO</u> If so, what's wrong? <u>N/A</u>				
Do you limp? <u>NO</u> Have you been injured lately? <u>NO</u> If so, what's wrong? <u>N/A</u>				
Are you ill? <u>NO</u> If so, what's wrong? <u>N/A</u>				
Did you get a bump on the head? <u>NO</u> Were you involved in an accident today? <u>NO</u> Have you had any alcoholic beverage since the <u>N/A</u>				
If so, what? <u>N/A</u> Where? <u>N/A</u> How much? <u>N/A</u> When? <u>N/A</u>				
Have you seen a doctor or dentist lately? <u>NO</u> If so, who? <u>N/A</u> When? <u>N/A</u>				
What for? <u>N/A</u> Are you taking tranquilizers, pills or medicines of any kind? <u>TYLENOL</u>				
If so, what kind? (Get sample) <u>TYLENOL</u> Last dose? <u>NOON</u> Do you have epilepsy? <u>NO</u> Diabetes? <u>NO</u>				
Do you take insulin? <u>NO</u> If so, last dose? <u>N/A</u> Have you had any injections of any other drugs recently? <u>NO</u>				
If so, what for? <u>N/A</u> What kind of drug? <u>N/A</u> Last dose? <u>N/A</u>				
When did you last sleep? <u>TONIGHT</u> How much sleep did you have? <u>30 MINUTES</u> Are you wearing false teeth? <u>NO</u> Glass eye? <u>NO</u>				
HANDWRITING SPECIMEN (Signature and/or anything he chooses)		<u>Benjamin P. Dover</u>		
SECTION IV - CHEMICAL TEST DATA				
TYPE OF SPECIMEN <input type="checkbox"/> Blood <input checked="" type="checkbox"/> Breath <input type="checkbox"/> Saliva <input type="checkbox"/> Urine <input type="checkbox"/> Other		TIME, DATE AND LOCATION OF TEST <u>0341, 20 NOV 00, BLDG 500, BROOKS AFB, TX</u>		
ADMINISTERED BY (Name, grade, SSN & organization) <u>RONALD D. RUCKER, SRA, 44A-55-6711, 519 SFS</u>			TEST RESULT <u>.29 BAC</u>	
IF TEST REFUSED, OR UNABLE TO BE ADMINISTERED, STATE REASON <u>N/A</u>				
SECTION V - VIDEO TAPE, MOTION PICTURE, VOICE RECORDINGS				
TYPE COVERAGE <input type="checkbox"/> Video tape <input checked="" type="checkbox"/> Motion Picture <input type="checkbox"/> Voice		SCOPE OF COVERAGE <input type="checkbox"/> Observation <input type="checkbox"/> Performance test <input type="checkbox"/> Interview		
TAKEN BY (Name, grade, SSN & organization) <u>N/A</u>			REFERENCE CODE <u>N/A</u>	
SECTION VI - SUPPLEMENTARY DATA				
WITNESSES	NAME	ADDRESS	TELEPHONE NO.	CONDITION
	<u>NONE</u>			
PASSENGERS IN SUSPECT'S VEHICLE	NAME	ADDRESS	TELEPHONE NO.	CONDITION
	<u>NONE</u>			

ATTACHMENT 33

DD FORM 2701, INITIAL INFORMATION FOR VICTIMS AND WITNESSES OF CRIME, FRONT

DEPARTMENT OF DEFENSE



INITIAL INFORMATION FOR VICTIMS AND WITNESSES OF CRIME

If You Need Additional Assistance:

In regard to the status of the investigation, contact the investigator below:

TSGT JOSEPH LAMB

(Name) 621-0891

(Telephone Number)

In regard to other assistance available, contact the command Victim/Witness Responsible Official, or the person identified below:

MAJ RONALD SMITH

(Name) 621-4333

(Telephone Number)

In regard to the prosecution, contact the legal office below:

CAPT MICHAEL STARK

(Name) 621-1842

(Telephone Number)

In regard to compensation for medical or other expenses, contact the state office for Crime Victim Compensation:

MS JOANNE REYNOLDS

(Name) 652-1333

(Telephone Number)

Please notify these offices of any changes of address or telephone number.

For further information on crime issues, contact:

Office for Victims of Crime Resource Center 1-800-627-6872

increased concern for their personal safety and that of their family, trouble concentrating on the job, difficulty handling everyday problems, feeling overwhelmed, and thinking of the crime repeatedly.

Some or all of these behaviors may occur and will ease with time. They are normal reactions but you may wish to see a counselor. State compensation funds may be available to reimburse you for such counseling. The Victim/Witness Assistance Responsible Official will have further information.

Your Rights As A Victim.

As a Federal crime victim, you have the following rights:

- The right to be treated with fairness and with respect for your dignity and privacy;
- The right to be reasonably protected from the accused offender;
- The right to be notified of court proceedings;
- The right to be present at all public court proceedings related to the offense, unless the court determines that your testimony would be materially affected if you as the victim heard other testimony at trial;
- The right to confer with the attorney for the government in the case;
- The right to available restitution;
- The right to information about the conviction, sentencing, imprisonment, and release of the offender.

## ATTACHMENT 34

DD FORM 2701, INITIAL INFORMATION FOR VICTIMS AND WITNESSES OF CRIME,  
REVERSE**Initial Information  
For Victims and Witnesses of Crime**

**Introduction.** We are concerned about the problems often experienced by victims and witnesses of crime. We know that as a victim or witness, you may experience anger, frustration, or fear as a result of your experience. The officer responsible for Victim/Witness Assistance (Victim/Witness Liaison or Advocate) at your installation can help.

We have prepared this brochure to help you deal with the problems and questions which often surface during an investigation and to provide you with a better understanding of how the military criminal justice system works. Your continued assistance is greatly needed and appreciated.

A criminal investigation can be both complex and lengthy and may involve several agencies, some Federal and some local. If you request, you will be kept informed of the status of your case by the investigator handling your case. His or her name is on the back of this brochure.

**If You Are Threatened Or Harassed.** If anyone threatens you or you feel that you are being harassed because of your cooperation with this investigation, contact the investigator or the Victim/Witness Responsible Official right away. It is a crime to threaten or harass a victim or witness.

**If You Were Injured.** If you do not have insurance to pay the cost of your medical or counseling bills, or related expenses, the state Crime Victim Compensation office may be able to assist. The telephone number for this office is on the back of this brochure.

**If You Were a Victim of Spouse or Child Abuse.** For your safety, you may want a restraining order, or temporary shelter. For information about these steps or about counseling services, call the Victim/Witness Responsible Official. If the offender is convicted or discharged for abusing you or your children, you may be eligible for "transitional compensation" benefits. Contact the prosecutor identified on the back of this brochure for further information.

**Restitution.** If an individual is arrested and prosecuted in federal court, you may be eligible for restitution. Restitution is court-ordered payment to you as a victim of crime. It is made by the offender for any out of pocket expenses caused by the crime. Restitution cannot be ordered as a sentence in a military court-martial, but it can be used as a condition of a pre-trial agreement to plead guilty to an offense, or as a condition of clemency or parole.

**If Property Was Stolen.** If your property was stolen, we hope to recover it as part of our investigation. If we do, we will notify you and return it to you as quickly as possible. Sometimes property needs to be held as evidence for trial. We will return your property once it is no longer needed as evidence.

**If You Need Assistance With Your Employer or Command.** If you have problems at work because of the crime or the investigation, we can contact your employer or Commanding Officer to discuss the importance of your role in the case.

**If An Arrest Is Made.** If you ask, you will be notified if a suspect is arrested. Since criminal defendants may be released before trial, you can ask for a restraining order to help protect you from the suspect.

**Trial.** Once an offense has been referred to trial, you will be contacted by the military trial counsel (prosecutor) or the Assistant U.S. Attorney assigned to handle your case, as appropriate. Each command and U.S. Attorney has a Victim/Witness Responsible Official to help answer your questions and deal with your concerns during the prosecution. You have the right to be consulted at key stages in the trial and will be informed of these rights by trial counsel.

**Confinement.** If the accused is sentenced to confinement (prison), you have a right to notification of changes in the confinee's status. Use a DD Form 2704, "Victim/Witness Certification and Election Concerning Inmate Status", to request that the confinement facility notify you of parole hearings, escape, release, or death of the confinee.

**The Emotional Impact of Crime.** Many victims and witnesses are emotionally affected by the crime. Although everyone reacts differently, victims and witnesses report some common behaviors, such as

ATTACHMENT 35

DD FORM 2708, RECEIPT FOR INMATE OR DETAINED PERSON

RECEIPT FOR INMATE OR DETAINED PERSON			
1. RECEIVED FROM (Unit or Agency and Station) 12 SFS, Randolph AFB, TX		2. TIME 00:12	3. DATE (YYYYMMDD) 20001225
4. INMATE NAME (Last, First, Middle) SEILER, Kevin Samuel		5. SSN 123-45-6789	6. GRADE SrA
7. ORGANIZATION 12 OMS		8. STATION Randolph AFB, TX	
9. OFFENSE Shoplifting			
10. PERSONAL PROPERTY Retained on person			
11. REMARKS None			
12. NAME AND TITLE OF PERSON RECEIVING ABOVE INDIVIDUAL DONALD BLEISTEIN		13. SSN 234-54-2430	14. GRADE MSgt
15. RECEIVING UNIT OR AGENCY AND STATION 12 OMS, Randolph AFB, TX		16. SIGNATURE <i>Donald Bleistein</i>	

DD FORM 2708, NOV 1999

## ATTACHMENT 36

## SAMPLE FORMAT FOR A BARMENT LETTER

(Use Appropriate Letterhead)

MEMORANDUM FOR

SUBJECT: Order Not To Enter or Reenter (Installation Name)

FROM:

1. It has come to my attention that you [describe incident(s) in detail; for example, "were found in possession of marijuana at the on-base quarters of Staff Sergeant John Smith on 15 January 1996."]

2. Based upon the above, I consider your continued presence on this installation to be detrimental to the maintenance of good order and discipline. Effective immediately, you are ordered not to enter or reenter (installation name) for a period of (state the time frame).

3. If you fail to comply with this order, you will be subject to prosecution under 18 United States Code §1382, which reads in part:

"Whoever reenters or is found within any installation, after having been removed therefrom or ordered not to reenter by any officer or person in command or charge therefore shall be fined under this title or imprisoned not more than six months, or both.

4. Should you reenter (installation name) in violation of this order, without having received prior approval, you will be subject to detention by the security forces for delivery to the appropriate civilian and military authorities.

5. If you are entitled to medical treatment at (hospital name), you may enter (installation name) for the sole purpose of using said facility. To do so, you must present this letter to the entry controller at the installation entry point and obtain the appropriate visitor pass. You will travel directly to the medical facility by [describe precise route the individual must travel to go to and from the medical facility]. You may not deviate from this route nor stop for any reason on your way to or from the facility.

6. Under extraordinary circumstances, requests for temporary access to other facilities on (installation name) may be granted. Such requests should be made in advance and in writing through the Chief of Security Forces, and set out the reason(s) why access should be granted. If time does not permit, such a request must be made to the security forces control center at (phone number). The controller will then notify the appropriate officials and convey your request.

7. This order will remain in effect [(indefinitely) or (for the period prescribed above)], unless otherwise modified or revoked in writing by myself. If a compelling reason exists which you believe should be sufficient to justify modification or termination of this order, you may submit your justification to me, in writing, through the Chief of Security Forces.

Installation Commander's  
Signature Block

cc: SFS Reports and Analysis Section

1<sup>st</sup> Ind,

TO: Installation Commander

This is to certify that I, the undersigned, have received the forgoing order in writing and have read and fully understand the same. I understand that entry upon (installation name), in violation of this order, may result in civilian prosecution pursuant to 18 U.S.C. §1382. I further understand that in the event of a conviction, the maximum penalty prescribed may be imposed.

Received and signed the \_\_\_\_\_ day of \_\_\_\_\_, 19\_\_\_\_.

---

Signature

2<sup>nd</sup> Ind,

TO: Installation Commander

**CERTIFICATION**

This is to certify that I \_\_\_\_\_, personally served a copy of the forgoing letter upon \_\_\_\_\_, this date by handing him/her a copy of same.

\_\_\_\_\_  
Signature

**ATTACHMENT 37**  
**DRIVER'S LICENSE INFORMATION**

(Sample Memo)

MEMORANDUM FOR (Put in who the memo is to)

SUBJECT: Notification of Person Convicted of an Intoxicated Driving Offense

TO: Department of Vehicle Registration and Licenses

This memo is to is to notify you that on (date), (last name, first name, middle initial) (social security number of person), a member of the (branch of Military Service or DOD Component), (unit), (installation location), was found guilty of (intoxicated driving or refusal to take a blood alcohol content (BAC) test in a court-martial, non-judicial proceeding under Article 15 of the UCMJ or civil court). (If civil court, give court name and case number). (He/she) holds a (state) driver's license, number (put in number), issued (issuing date), expiring on (expiration date). (He/she) was apprehended by (name of SF member or police officer) on (date and location) while driving vehicle license number (put in vehicle information).

A BAC (was or was not) taken with a reading of (put in BAC results if available). Based on the above information, this individual's installation driving privileges have been (suspended/revoked for) (insert number of years). The individual's current address is: (put in individual's address).

SIGNATURE BLOCK OF SFAR