

DESERTER/ABSENTEE WANTED BY THE ARMED FORCES				1. DATE PREPARED (YYYYMMDD)		REPORT CONTROL SYMBOL DD-P&R(SA)1454			
2. TO (Local, State or Federal law enforcement authority as indicated by Military Deserter Information Point)			3. FROM (Organization or activity and place from which absent. If unauthorized absence occurs in transit, list old and new unit in Remarks)			4. DISTRIBUTION			
5. ABSENTEE IDENTIFICATION									
a. NAME (Last, First, Middle Initial)			b. GRADE/RANK/RATE		c. SEX			d. RACE	
e. PLACE OF BIRTH (City, State, Country)		f. DATE OF BIRTH (YYYYMMDD)	g. HEIGHT	h. WEIGHT	i. EYE COLOR			j. HAIR COLOR	
k. DIP CONTROL NUMBER		l. SERVICE	m. SOCIAL SECURITY NO.		n. CITIZENSHIP	o. MARITAL STATUS			
p. MILITARY OCCUPATION			r. PERMANENT RESIDENCE ADDRESS (Include Zip Code)						
q. CIVILIAN OCCUPATION									
6. CURRENT ENLISTMENT				7. ENTRY INTO CURRENT PERIOD OF SERVICE				8. ATTACH PHOTOGRAPH (If available)	
a. DATE (YYYYMMDD)		b. PLACE (City and State)		a. DATE (YYYYMMDD)		b. PLACE (City and State)			
9. TIME OF ABSENCE		a. DATE (YYYYMMDD)	b. HOUR	10. ADMINISTRATIVE DATE OF DESERTION (YYYYMMDD)					
11. ESCAPED OR SENTENCED PRISONER (X as applicable)				12. DISCHARGE STATUS (X as applicable)					
<input type="checkbox"/> YES	IF "YES," SPECIFY CHARGE			<input type="checkbox"/> a. DISCHARGED	<input type="checkbox"/> YES	<input type="checkbox"/> NO			
<input type="checkbox"/> NO				<input type="checkbox"/> b. SUSPENDED	<input type="checkbox"/> YES	<input type="checkbox"/> NO			
13. OPERATOR'S LICENSE		a. NUMBER	b. STATE	c. EXP. DATE (YYYYMMDD)	14. VEHICLE LICENSE	a. PLATE NO.	b. STATE	c. EXP. DATE (YYYYMMDD)	d. TYPE
15. VEHICLE	a. VEHICLE IDENTIFICATION NUMBER		b. YEAR	c. MAKE	d. MODEL	e. STYLE	f. COLOR		
16. RELATIVES AND/OR PERSONS KNOWN BY ABSENTEE (If more space is needed, continue in Remarks or on a separate page, making reference to this item number.)									
a. NAME (Last, First, Middle Initial)					b. ADDRESS (Include Zip Code)				
(1)									
(2)									
17. CERTIFICATION (See Notes on back)									
<p>The undersigned states: That he/she is a commissioned officer of the United States _____ (Military Department), presently assigned as the Commanding Officer, _____ (Unit from which the alleged deserter absented himself or herself), and in the performance of official duties imposed by Department of Defense Directive 1325.2 and _____ (Regulations of the Service concerned which implement DOD Directive 1325.2, e.g. Army Regulations 190-9 and 630-10), he/she has conducted an investigation into the status of _____ (Name and rank of alleged deserter), a member of the United States Armed Forces serving on active duty with _____ (Unit and Service from which the alleged deserter absented himself or herself), by questioning his/her unit cohorts; by examining and verifying the field service records of said service member which reflect his/her duty status; by requesting the member's next of kin to urge his/her voluntary return to military control if they are aware of his/her whereabouts; by inquiring to the fullest extent possible into the feasibility of other explanations for the member's absence, to include sickness, injury, hospitalization, and confinement by civil law enforcement officials; and officially ordered diversion from his/her unit of assignment by querying the member's losing unit (and en route temporary duty unit), the appropriate career management division, the servicing replacement organization, and the servicing Military Personnel and Transportation Assistance Office (and (See Note 1) _____).</p> <p>That based on the aforesaid investigation, the undersigned has personal knowledge that, on or about _____ (Date - YYYYMMDD), _____ (Name and rank of alleged deserter), did, without authority and with intent to remain away therefrom permanently, absent himself/herself from his/her unit/organization/place of duty, to wit: (See item 3 above) located at (See item 3) in violation of Section 885, Title 10, United States Code and he/she has remained continuously so absent until _____ (Date this statement is executed - YYYYMMDD). I state under penalty of perjury (under the laws of the United States of America (See Note 2) that the foregoing is true and correct. Executed on _____ (Date - YYYYMMDD).</p>									
18. COMMANDING OFFICER									
a. TYPED NAME (Last, First, Middle Initial)			b. GRADE		c. TITLE				
d. ORGANIZATION AND INSTALLATION			e. SIGNATURE (All copies)				f. DATE SIGNED (YYYYMMDD)		