

SECTION B - DEBT V. ACTIONS (cont.)

11. ADVERSE ACTION@	11a. TYPE OF ACTION	11b. DATE OF SOURCE DOCUMENT	11c. PUNISHMENT	11d. EFFECTIVE DATE	11e. COMPLETION DATE
All that have occurred within the 60 days prior to issuance of DA FORM 137-R series. INCLUDE: UCMJ, Court Martial, Admn. Reductions, and Administrative Discharges.					

12. PROPERTY ACCOUNTABILITY@	12a. STATEMENT OF CHARGES	12b. DATE OF SOURCE DOCUMENT	12c. AMOUNT	12d. DISPOSITION
	12e. REPORT OF SURVEY	<input type="checkbox"/>		

13. SPECIAL PAYS@* MARK ALL THAT APPLY: SOAP FLPP JUMP DEIP SEA DEMOLITION FLIGHT OTHER _____

SECTION C - UNIT / BATTALION CLEARANCES@*

14. BN S1/Unit Commander VERIFYING OFFICIAL	14a. TYPE OR PRINT NAME	14b. SIGNATURE	14c. DATE
EVALUATIONS	MEAL CARD	PROFILE	
DUTY ROSTER	MAIL ROOM		
DA FORM 31	FLAGGED		

15. BN S2/Unit Commander VERIFYING OFFICIAL	15a. TYPE OR PRINT NAME	15b. SIGNATURE	15c. DATE
SECURITY DEBRIEFING	ANTI-TERRORISM BRIEFING	TRAINING ROOM	

16. BN S4/Unit Commander VERIFYING OFFICIAL	16a. TYPE OR PRINT NAME	16b. SIGNATURE	16c. DATE
MOTOR POOL	NBC ROOM		
SUPPLY ROOM	ARMS ROOM		

17. OTHER	17a. TYPE OR PRINT NAME	17b. SIGNATURE	17c. DATE
CAREER COUNSELOR			

18. NAME OF SOLDIER	18a. SIGNATURE	18b. DATE

19. NAME OF COMMANDER/S1 AUTHENTICATING OFFICIAL	19a. SIGNATURE	19b. DATE

INSTALLATION CLEARANCE RECORD

For use of this form, see AR 608-8-101; the proponent agency is ODCSPER

DATA REQUIRED BY THE PRIVACY ACT OF 1974

AUTHORITY: Section 301, Title 5, USC.
PRINCIPAL PURPOSE: To ensure personnel readiness prior to PCS. To complete clearance verification prior to transition from active duty, separation, or retirement.
ROUTINE USES: To close out installation personnel and finance records. To ensure debt to government or government sponsored agencies is identified and action taken to obtain remittance prior to soldier's transition from Active duty, separation or retirement. Forms will not be disclosed outside Department of Defense (DoD) and DoD sponsored agencies.
DISCLOSURE: Disclosure is voluntary; however, failure to complete these forms may result in only partial payment of final pay.

INSTRUCTIONS TO SOLDIER: This out-processing packet is designed to assist you and the installation in completing your final clearance as accurately and expeditiously as possible. It is your responsibility to properly complete this checklist. If you are separating or retiring from the Active Army, failure to complete this checklist correctly and entirely will result in your receiving 55 percent of your final pay pending verification by DFAS of any outstanding debts. Activities marked with an @ require clearance for all personnel separating or retiring from the Active Army; to include AGR personnel. Activities marked with an asterisk (*) require clearance for personnel departing on PCS. Activities not marked will be cleared per installation instructions. This checklist must be completed prior to your final finance appointment. Separation payments will not be released until installation clearance is completed.

SECTION A. - PERSONAL DATA (To be completed by commander, ST, out-processing control station, or appointed official)

1. NAME 5. GAINING UNIT 8. REASON FOR CLEARING <input type="checkbox"/> PCS <input type="checkbox"/> ETS <input type="checkbox"/> RETIREMENT <input type="checkbox"/> OTHER (Specify) _____	2. RANK 6. LOSING UNIT 9. DEPARTURE DATE	3. SSN 7. DATE OF ORDERS	4. ORDERS NO.
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SECTION B. - INSTALLATION STANDARD CLEARANCES

10. INSTALLATION ACTIVITY	DEBT			11. TYPED NAME AND TELEPHONE NO.	12. SIGNATURE
	a. YES	b. AMOUNT	c. NO		
(1) Club System@ *					
(2) Housing/Billeting@ *					
(3) Education Office@ *					
(4) Central Issue Facility@ *					
(5) Dental Facility@ *					
(6) Medical Facility@ *					
(7) DEERS/ID Cards/ID Tags@ *					
(8) Personnel Office/Promotions@ *					
(9) Personnel Information@ *					
(10) Transportation@ *					

10. INS TION ACTIVITY (Continued)	DEBT			11. TYPED NAME AND TELEPHONE NO.	12. SIGNATURE
	a. YES	b. AMOUNT	c. NO		
(11) Post Exchange@					
(12) Army Emergency Relief@					
(13) Commissary					
(14) Army Community Services					
(15) Provost Marshal					
(16) Library					
(17) Training Aids Center					
(18) Morale, Welfare, and Recreation					
(19) Commercial Activities					
(20)					
(21)					
(22)					
13. GOVERNMENT TRAVEL CARD@					
13a. Does the soldier have an account?		13b. TYPED NAME AND TELEPHONE NO.			
Yes <input type="checkbox"/> No <input type="checkbox"/>		Disposition _____			
14. Soldier has completed ACAP Processing@					
if no, remarks: _____		Yes <input type="checkbox"/> No <input type="checkbox"/>		14a. TYPED NAME AND TELEPHONE NO.	
				14b. SIGNATURE AND DATE	
SECTION C - MILITARY PAY PROCESSING					
15. Travel Pay Processing@*					
15a. TYPED NAME AND TELEPHONE NO.				15b. SIGNATURE AND DATE	
16. Separation Pay Processing@					
16a. TYPED NAME AND TELEPHONE NO.				16b. SIGNATURE AND DATE	
17. Debt Processing@					
17a. TYPED NAME AND TELEPHONE NO.				17b. SIGNATURE AND DATE	
SECTION D - OUT-PROCESSING CONTROL STATION					
18. Soldier has completed Out-Processing					
Remarks: _____		Yes <input type="checkbox"/> No <input type="checkbox"/>		18a. TYPED NAME AND TELEPHONE NO.	
				18b. SIGNATURE AND DATE	

<p>PERSONAL CLOTHING REQUEST</p> <p>For use of this form, see AR 700-84; the proponent agency is DCSLOG (SEE REVERSE FOR PRIVACY ACT STATEMENT)</p>		<p>1. DOCUMENT NO.</p> <p>2. VOUCHER NO.</p> <p>3. DATE</p>	
<p>4. NAME (Last, First MI)</p> <p>5. SSN</p> <p>6. GRADE</p>		<p>7. ORGANIZATION</p> <p>HHC & ST, 19TH TAACOM</p> <p>APD AP 96218-0171</p>	
<p>8. DODAAC</p> <p>9. PRIORITY</p> <p>10. ARMY MILITARY CLOTHING SALES STORE</p>		<p>11. CATEGORY (Check one)</p> <p><input checked="" type="checkbox"/> Active Army <input type="checkbox"/> NG <input type="checkbox"/> USAR</p> <p><input type="checkbox"/> IMA <input type="checkbox"/> AGR <input type="checkbox"/> IRR</p> <p><input type="checkbox"/> Initial <input type="checkbox"/> Replacement <input type="checkbox"/> Exchange <input type="checkbox"/> Individual Charge Sale</p> <p><input type="checkbox"/> Gratuitous <input type="checkbox"/> Supplemental <input type="checkbox"/> Temporary</p>	
<p>12. TYPE OF TRANSACTION</p>		<p>13. INVENTORY</p> <p>DATE BY</p> <p>14. PHONE NO.</p> <p>15. POSTED</p>	
<p>16. AUTHORIZED BY</p> <p>APPROVED BY</p> <p>18. DATE APPROVED</p>		<p>19. QNTY.</p> <p>20. ARTICLES (Common)</p> <p>21. SIZE</p> <p>22. UNIT PRICE</p> <p>23. TOTAL COST</p> <p>24. QNTY.</p> <p>25. ARTICLES (Male)</p> <p>26. SIZE</p> <p>27. UNIT PRICE</p> <p>28. TOTAL COST</p>	
<p>29. ARTICLES (Female)</p>		<p>30. REMARKS</p> <p>INVENTORIED BY</p> <p>DATE:</p>	
<p>31. SIGNATURE OF RECIPIENT</p>		<p>TOTAL VALUE</p>	

FEMALE

ADDITIONAL ORGANIZATIONAL CLOTHING AND INDIVIDUAL EQUIPMENT RECORD

For use of this form, see DA PAM 710-2-1. The proponent agency is USAQMS.

NAME (Last, First, MI) AND SOCIAL SECURITY NUMBER

INSTRUCTIONS: Overprinting is authorized. Entries in ink (MOS - pencil, Auth Alv - pencil or ink). Enter authorized allowance for each item. Enter the item description of issued items in the Clothing and Equipment block. Enter quantity of each item possessed by individual. Advance ALL totals to next column on any item changes. Individual's signature and date required on reverse side.

DUTY MOS

CLOTHING AND EQUIPMENT	AUTH	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21
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BAG CHEMICAL EQUIPMENT

APRON FOOD HANDLERS

BODY ARMOR PASGT

BAG BARACKS COTTON

BAG DUFFEL

BAG CLOTHING WATERPROOF

BELT INDIVIDUAL EQUIPMENT

BOOTS COLD WEATHER

CANTEN WATER PLASTIC

CARRIER INTRENCHING TOOL

CASE FIELD FIRST AID LC-1

COVER HELMET CAMO KEVLAR

COVER WATER CANTEN

COVERALLS INSULATED (TO

WHICH THEY APPLY)

COTTON (TO WHOM

THEY APPLY)

CUP WATER CANTEN

FIELD PACK LC-1

HELMET, KEVLAR

HOOD EXTREME COLD WEATHER

INTRENCHING TOOL HAND

LINER COAT COLD WEATHER

LINER PARKA EXT CLD WEATHER

MAT SLEEPING

MITTEN INSERT WOOL

MITTEN SHEETS

TROUSERS WET WEATHER

OVERSHOES BOOT COMBAT

PARKA EXT COLD WEATHER

PARKA WET WEATHER

PONCHO WET WEATHER

SI COLD WEATHER

SHIRT SLEEPING

SLEEPING BAG EXT CLD WEATHER

SUIT CHEMICAL PROTECTIVE

TROUSERS COLD WEATHER

TROUSERS WET WEATHER

OVERSHOES BOOT COMBAT

PARKA EXT COLD WEATHER

PARKA WET WEATHER

PONCHO WET WEATHER

SI COLD WEATHER

SHIRT SLEEPING

SLEEPING BAG EXT CLD WEATHER

SUIT CHEMICAL PROTECTIVE

TROUSERS COLD WEATHER

TROUSERS WET WEATHER

OVERSHOES BOOT COMBAT

PARKA EXT COLD WEATHER

PARKA WET WEATHER

PONCHO WET WEATHER

SI COLD WEATHER

SHIRT SLEEPING

SLEEPING BAG EXT CLD WEATHER

SUIT CHEMICAL PROTECTIVE

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