NAME OF SERVICE MEMBER (LAST EIDORS THE ITIAL)			G	GRADE AFSN/SSAN					
									_
Image: Nype uoth PERSONAL APPEARANCE				x	X RECORD REVIEW				
COUNSEL	NAME OF COUNSEL	AND OR ORGANIZATION		- ADD	RESS AND	OR ORGANIZAT	TION OF COUNS	EL	
YES No X	1								
A	<u> </u>						E OF THE B		
	N	IEMBER SITTIN	G					<u> </u>	DEN
	····				HON	GEN	UOTHC	OTHER	
									X
-									v
						 			X
									х
						<u> </u>			
									X
						[X
ISSUES					P	NHIRITS SI	RMITTED	O THE BOAF	D D
A94	4.05	r		1	1111120100102	NUMBER OF A CONTRACTOR OF A CO	NG THE BOA	CONTRACTOR OF THE	
				2				DISCHARGE	
				3	LETTE	R OF NOTIF	ICATION		
				4	+	OF PERSON			
							ASE TO THE		IE OF
					ADDITIONAL EXHIBITS SUBMITTED AT TIME OF PERSONAL APPEARANCE				
					TAPE	RECORDING	G OF PERSON	AL APPEARA	NCE
HEARING DATE		CASE NUMBER							
09 Mar 200	5	FD-2004-00417							
07 1.1ML 800					.1		DI CRUDELAT DA	TIONALE	
	TE AND THE BOARD'S I	DECISIONAL RATIONALE A	REDIGCOSED ON THE ATTACH	D AIR PORCE DI	SCHARGE R	EAIEM BOYKD	DECISIONAL RA		
APPLICANT STS			KEDISCUSSED UN HE ALLACH	D AIR FORCE DI	SCHARGE R	EVEW BOARD	DECISICATAL NA		
APPLICANT STS	at Washington,		Rediscusti un hie al laire	D AIR FORCE DI	SCHARGE R	EVIEW BOARD	DECISIONAL RA		
APPLICANTS IS	at Washington,	, D.C.	d, the right to a perso						it to
APPLICANTS IS Case heard Advise app	at Washington,	D.C.							t to
Arrucantsis Case heard Advise app submit an a	at Washington, licant of the dec pplication to th	D.C. cision of the Boar e AFBCMR.	d, the right to a perso	nal appear	ance wi				it to
Arrucantsis Case heard Advise app submit an a	at Washington, licant of the dec pplication to th	D.C. cision of the Boar e AFBCMR.		nal appear	ance wi				it to
Arrucantsis Case heard Advise app submit an a	at Washington, licant of the dec pplication to th	D.C. cision of the Boar e AFBCMR.	d, the right to a perso	nal appear	ance wi				t to
Arrucantsis Case heard Advise app submit an a	at Washington, licant of the dec pplication to th	D.C. cision of the Boar e AFBCMR.	d, the right to a perso	nal appear	ance wi				t to
Arrucantsis Case heard Advise app submit an a	at Washington, licant of the dec pplication to th	D.C. cision of the Boar e AFBCMR.	d, the right to a perso	nal appear	ance wi				it to
Arrucantsis Case heard Advise app submit an a	at Washington, licant of the dec pplication to th	D.C. cision of the Boar e AFBCMR. nade available to t	d, the right to a perso	nal appear	ance wi				it to
Arrucantsis Case heard Advise app submit an a	at Washington, licant of the dec pplication to th	D.C. cision of the Boar e AFBCMR.	d, the right to a perso	nal appear	ance wi				it to
Arrucantsis Case heard Advise app submit an a	at Washington, licant of the dec pplication to th	D.C. cision of the Boar e AFBCMR. nade available to t	d, the right to a perso	nal appear	ance wi				it to
Arrucantsis Case heard Advise app submit an a	at Washington, licant of the dec pplication to th	D.C. cision of the Boar e AFBCMR. nade available to t	d, the right to a perso the applicant at the ap	nal appear	ance wi	ith/withou	t counsel, a	and the righ	it to
Arrucants is Case heard Advise app submit an a Names and	at Washington, licant of the dec pplication to th	D.C. cision of the Boar e AFBCMR. nade available to t	d, the right to a perso the applicant at the ap	nal appear	ance wi	ith/withou		and the righ	t to
Arrucants is Case heard Advise app submit an a Names and	at Washington, licant of the dec pplication to th	D.C. cision of the Boar e AFBCMR. nade available to t	d, the right to a perso the applicant at the ap	nal appear plicant's r	ance wi equest.	ith/withou	t counsel, a DATE: 3/9/2 RSONNEL COUN	and the righ	t to
Arrucants is Case heard Advise app submit an a Names and Names and	at Washington, licant of the dec pplication to th votes will be m	D.C. cision of the Boar e AFBCMR. nade available to t nade available to t	d, the right to a perso the applicant at the ap	nal appear plicant's r secreta AIR FORC 1535 COM	ance wi equest. equest. ry of the e dischar Mand Dr, 1	ith/withou Air Force Pe Ge Review B Lee Wing, 3RD J	DATE: 3/9/2 RSONNEL COUN	and the righ	t to
Arrucants is Case heard Advise app submit an a Names and Names and	at Washington, licant of the dec pplication to th votes will be m	D.C. cision of the Boar e AFBCMR. nade available to t nade available to t	d, the right to a perso the applicant at the ap	nal appear plicant's r secreta AIR FORC 1535 COM	ance wi equest.	ith/withou Air Force Pe Ge Review B Lee Wing, 3RD J	DATE: 3/9/2 RSONNEL COUN	and the righ	it to
Arrucants IS Case heard Advise app submit an a Names and Names and	at Washington, licant of the dec pplication to th votes will be m votes will be m MRBR STREET WEST, SU DOLPH AFB, TX 78	D.C. cision of the Boar e AFBCMR. nade available to t INDOR JITE 40 150-4742	d, the right to a perso the applicant at the ap	nal appear plicant's r secreta AIR FORC 1535 COM	ance wi equest. equest. ry of the e dischar Mand Dr, 1	AIR FORCE PE GE REVIEW B& EE WING, 3RD J 0762-7002	DATE: 3/9/2 RSONNEL COUN DARD FLOOR	and the righ	t to
Arrucants IS Case heard Advise app submit an a Names and Names and	at Washington, licant of the dec pplication to th votes will be m	D.C. cision of the Boar e AFBCMR. nade available to t INDOR JITE 40 150-4742	d, the right to a perso the applicant at the ap	nal appear plicant's r secreta AIR FORC 1535 COM	ance wi equest. equest. ry of the e dischar Mand Dr, 1	AIR FORCE PE GE REVIEW B& EE WING, 3RD J 0762-7002	DATE: 3/9/2 RSONNEL COUN DARD FLOOR	and the righ	t to

AIR FORCE DISCHARGE REVIEW BOARD DECISIONAL RATIONALE

CASE NUMBER

FD-2004-00417

GENERAL: The applicant appeals for upgrade of discharge to honorable.

The applicant was offered a personal appearance before the Discharge Review Board but declined to exercise this right.

The attached brief contains available pertinent data on the applicant and the factors leading to the discharge.

FINDINGS: Upgrade of discharge is denied.

The Board finds the applicant submitted no issues contesting the equity or propriety of the discharge, and after a thorough review of the record, the Board was unable to identify any that would justify a change of discharge.

ISSUE: Applicant contends discharge was inequitable because it was too harsh. The records indicated the applicant requested an Under-other-than Honorable Discharge in Lieu of Court Martial. On 27 August 2001, charges were preferred on the applicant including one charge with four specifications for bad checks in violation of Article 123a, UCMJ, and one charge and specification for failure to pay a debt in violation of Article 134, UCMJ. The applicant was charged with making, drawing, or uttering checks without sufficient funds in the amount of \$6147.74 and failure to pay a just debt involving her government travel card in the amount of \$3073.55. The Board concluded the misconduct was a significant departure from conduct expected of all military members. The characterization of the discharge received by the applicant was found to be appropriate.

CONCLUSIONS: The Discharge Review Board concludes that the discharge was consistent with the procedural and substantive requirements of the discharge regulation and was within the discretion of the discharge authority and that the applicant was provided full administrative due process.

In view of the foregoing findings the Board further concludes that there exists no legal or equitable basis for upgrade of discharge, thus the applicant's discharge should not be changed.

Attachment: Examiner's Brief

FD2004-00417

DEPARTMENT OF THE AIR FORCE AIR FORCE DISCHARGE REVIEW BOARD ANDREWS AFB, MD

(Former SSGT) (HGH SSGT)

1. MATTER UNDER REVIEW: Appl rec'd a UOTHC Disch fr Seymour Johnson AFB, TX on 30 Nov 01 UP AFI 36-3208, Chapter 4 (Discharge in Lieu of Court Martial). Appeals for Honorable Discharge.

2. BACKGROUND:

a. DOB: 11 Dec 73. Enlmt Age: 17 7/12. Disch Age: 27 11/12. Educ: HS DIPL. AFQT: N/A. A-69, E-50, G-46, M-34. PAFSC: 4A071 - Health Services Management Craftsman. DAS: 6 Mar 92.

b. Prior Sv: (1) AFRes 15 Jul 91 - 17 Nov 91 (4 months 3 days)(Inactive).

(2) Enlisted as A1C 18 Nov 91 for 4 yrs. Reenlisted as SrA 6 Dec 94 for 4 yrs. Svd: 7 yrs 0 months 1 day, all AMS. SrA - 18 Sep 93. SSgt -1 Jun 97. EPRs: 5,5,5,5,5.

3. SERVICE UNDER REVIEW:

a. Reenlisted as SSgt 20 Nov 98 for 4 yrs. Svd: 3 Yrs 0 Mo 10 Das, all AMS:

b. Grade Status: None.

c. Time Lost: None.

d. Art 15's: None.

e. Additional: None.

f. CM: None.

h. Awards & Decs: AFCM, AFLSAR W/1 DEV, AFTR, NDSM, NCOPMER, AFOUA W/3 DEVS, AFGCM W/2 DEVS.

i. Stmt of Sv: TMS: (10) Yrs (4) Mos (16) Das TAMS: (10) Yrs (0) Mos (13) Das

4. BASIS ADVANCED FOR REVIEW: Appln (DD Fm 293) dtd 7 Oct 04. (Change Discharge to Honorable)



ISSUES ATTACHED TO BRIEF.

ATCH

- Applicant's Issues.
 Eight Enlisted Performance Reports.
 Six Character References.

20DEC04/ia

FROM THE ARME	FOR THE REVIEW D FORCES OF THI	E UNITED STATE			Form Approved OMB No. 0704-0004
(Please read instructions on					Expires Aug 31, 2006
The public reporting burden for this collection of informa gathering and maintaining the data needed, and completi of Information, including suggestions for reducing the bur that notwithstanding any other provision of law, no pers control number. PLEASE DO NOT RETURN YOUR BACK OF THIS PAGE.	ng and reviewing the collection den, to the Department of Def	n of information. Send com ense, Executive Services an	ments regarding the d Communications I	s burden estima Directorate (070	te or any other aspect of this colle 4-0004). Respondents should be a
	PRIVAC	Y ACT STATEMENT			·
AUTHORITY: 10 U.S.C. 1553; E.O. 9397 PRINCIPAL PURPOSE(S): To apply for a ch ROUTINE USE(S): None. DISCLOSURE: Voluntary; however, failure	hange in the characteriz to provide identifying i	zation or reason for n	ede processina	of this appli	
Social Security Number is strictly to assure 1. APPLICANT DATA (The person whose of					-
a. BRANCH OF SERVICE (X one) ARMY	MARINE CORPS	NAVY			1 1
NAME (Lest, First, Middle Initial)	induite outra	c. GRADE/RANK AT I			COAST GUARD
		SSgt		a. SUCIAL SECORITE NORTHERAD	
2. DATE OF DISCHARGE OR SEPARATION	4. DISCHARGE CHAI	RACTERIZATION REC	EIVED (X one)	5. BOARD	ACTION REQUESTED (X d
(YYYYMMDD) (If date is more than 15 years ago, submit a DD Form 149)	HONORABLE				E TO HONORABLE
20011130		IONORABLE CONDITIO			E TO GENERAL/UNDER
. UNIT AND LOCATION AT DISCHARGE		AN HONORABLE COND		CHANG	E TO UNCHARACTERIZED
OR SEPARATION		pecial court-martial only;	,		plicable for Air Force)
th Medical Group/Seymour Johnson	OTHER (Explain)				ATION TO:
AFR NC. ISSUES: WHY AN UPGRADE OR CHANG					
7. (X if applicable) AN APPLICATION W. AND THIS FORM IS SUBMITTED TO IN SUPPORT OF THIS APPLICATION, THI	efore the court-martia ention of legal. I had AS PREVIOUSLY SUBN ADD ADDITIONAL ISS E FOLLOWING ATTACK	al date. I also belie a very exemplified MITTED ON (YYYYMM UES, JUSTIFICATION HED DOCUMENTS A	ved had I beer record with th	n in a different ne miliatry.	· · · · · · · · · · · · · · · · · · ·
7. (X if applicable) AN APPLICATION W. AND THIS FORM IS SUBMITTED TO IN SUPPORT OF THIS APPLICATION, THE If military documents or medical records are re-	efore the court-martia ention of legal. I had AS PREVIOUSLY SUBN ADD ADDITIONAL ISS E FOLLOWING ATTACI	al date. I also belie a very exemplified MITTED ON (YYYYMM UES, JUSTIFICATION HED DOCUMENTS AL 6 Send course l	ved had I beer record with th DD) N, OR EVIDENC RE SUBMITTED	n in a differ ne miliatry. E. DAS EVIDEN	CE: (Continue in Item 17.
7. (X if applicable) AN APPLICATION W AND THIS FORM IS SUBMITTED TO IN SUPPORT OF THIS APPLICATION, THI If military documents or medical records are re- copies of Enlisted Performance Reports,	efore the court-martia ention of legal. I had AS PREVIOUSLY SUBN ADD ADDITIONAL ISS E FOLLOWING ATTACI	al date. I also belie a very exemplified MITTED ON (YYYYMM UES, JUSTIFICATION HED DOCUMENTS AL 6 Send course l	ved had I beer record with th DD) N, OR EVIDENC RE SUBMITTED	n in a differ ne miliatry. E. DAS EVIDEN	CE: (Continue in Item 17.
Type OF REVIEW REQUESTED (X one) CONDUCT A RECORD REVIEW OF MY DISCH	efore the court-martia ention of legal. I had AS PREVIOUSLY SUBN ADD ADDITIONAL ISS E FOLLOWING ATTACH levant to your case, please Character Statements	al date. I also belie a very exemplified MITTED ON (YYYYMM UES, JUSTIFICATION HED DOCUMENTS AF e send copies.) s by various individ	ved had I beer record with th DD/ N, OR EVIDENC RE SUBMITTED uals whom I s	n in a difference miliatry. E. DAS EVIDEN served with	ent squadron no charges
Type OF REVIEW REQUESTED (X one) CONDUCT A RECORD REVIEW OF MY DISCH SUBMITTED BY ME. I AND/OR (counsel/representative) WISH TO A	efore the court-martia ention of legal. I had AS PREVIOUSLY SUBN ADD ADDITIONAL ISS E FOLLOWING ATTACH levant to your case, please Character Statements	al date. I also belie a very exemplified MITTED ON (YYYYMM UES, JUSTIFICATION HED DOCUMENTS Al e send copies.) s by various individ	ved had I beer record with th DD/ N, OR EVIDENC RE SUBMITTED uals whom I s E AND ANY ADD	n in a differ ne miliatry. E. AS EVIDEN served with	CE: (Continue in Item 17. while in the military.
Yould have even been brought to the atternation of the atternation of the applicable. 7. (X if applicable.) AN APPLICATION W. AND THIS FORM IS SUBMITTED TO IN SUPPORT OF THIS APPLICATION, THIS If military documents or medical records are records are records of Enlisted Performance Reports, TYPE OF REVIEW REQUESTED (X one) CONDUCT A RECORD REVIEW OF MY DISCH SUBMITTED BY ME. I AND/OR (counsel/representative) WISH TO A WASHINGTON, D.C. METROPOLITAN AREA.	efore the court-martia ention of legal. I had AS PREVIOUSLY SUBM ADD ADDITIONAL ISS E FOLLOWING ATTACK levant to your case, please Character Statements Character Statements EXARGE BASED ON MY MILL DATACHER ASED ON MY MILL DATACHER ASED ON MY MILL PREAR AT A HEARING A	al date. I also belie a very exemplified MITTED ON (YYYYMM UES, JUSTIFICATION HED DOCUMENTS A e send copies.) s by various individ	Ved had I beer record with th DD) N, OR EVIDENC RE SUBMITTED uals whom I s E AND ANY ADD RD. GOVERNMENT	n in a differ ne miliatry. E. AS EVIDEN Served with	CE: (Continue in Item 17. While in the military.
TYPE OF REVIEW REQUESTED (X one) CONDUCT A RECORD REVIEW OF MY DISCH SUBMITTED BY ME. I AND/OR (counsel/representative) WISH TO A I AND/OR (counsel/representative) WISH TO A I AND/OR (counsel/representative) WISH TO A	efore the court-martia ention of legal. I had AS PREVIOUSLY SUBN ADD ADDITIONAL ISS E FOLLOWING ATTACH levent to your case, please Character Statements Character Statements ARGE BASED ON MY MIL psentative/ WILL NOT APP APPEAR AT A HEARING A	al date. I also belie a very exemplified MITTED ON (YYYYMM UES, JUSTIFICATION HED DOCUMENTS AI e send copies.) s by various individ JTARY PERSONNEL FIL EAR BEFORE THE BOAI T NO EXPENSE TO THE (NOTE: The N	ved had I beer record with th DD/ N, OR EVIDENC RE SUBMITTED uals whom I s E AND ANY ADD RD. GOVERNMENT I GOVERNMENT I avy Discharge Re	a in a difference miliatry.	ENT Squadron no charges ICE: (Continue in Item 17. while in the military. UMENTATION BOARD IN THE AVELING PANEL CLOSEST TO coes not have a traveling panel
Type of Review Requested (X one) Conduct A Record Review Of MY Disch Type of Review Requested (X one) Conduct A Record Review of MY Disch Submitted By Me. 1 AND/OR (counsel/representative) WISH TO A WASHINGTON, D.C. METROPOLITAN AREA. 1 AND/OR (counsel/representative) WISH TO A Ventoric (y and state)	efore the court-martia ention of legal. I had AS PREVIOUSLY SUBN ADD ADDITIONAL ISS E FOLLOWING ATTACH levent to your case, please Character Statements Character Statements ARGE BASED ON MY MIL esentative/ WILL NOT APP APPEAR AT A HEARING A APPEAR AT A HEARING A IME (Last, First, Middle In	al date. I also belie a very exemplified MITTED ON (YYYYMM UES, JUSTIFICATION HED DOCUMENTS AI e send copies.) s by various individ JTARY PERSONNEL FIL EAR BEFORE THE BOAI T NO EXPENSE TO THE (NOTE: The N	ved had I beer record with th DD/ N, OR EVIDENC RE SUBMITTED uals whom I s E AND ANY ADD RD. GOVERNMENT I GOVERNMENT I avy Discharge Re	a in a difference miliatry.	Ent squadron no charges ICE: (Continue in Item 17. while in the military. CUMENTATION BOARD IN THE AVELING PANEL CLOSEST TO
Type of Review Requested (X one) Conduct A Record Review Of MY Discharge Type of Review Requested (X one) Conduct A Record Review of MY Disch Submitted By Me. I AND/OR (counsel/representative) WISH TO A WASHINGTON, D.C. METROPOLITAN AREA. I AND/OR (counsel/representative) WISH TO A (enter city and state) a. COUNSEL/REPRESENTATIVE (// any) NA	efore the court-martia ention of legal. I had AS PREVIOUSLY SUBN ADD ADDITIONAL ISS E FOLLOWING ATTACH levent to your case, please Character Statements Character Statements ARGE BASED ON MY MIL esentative/ WILL NOT APP APPEAR AT A HEARING A APPEAR AT A HEARING A IME (Last, First, Middle In	al date. I also belie a very exemplified MITTED ON (YYYYMM UES, JUSTIFICATION HED DOCUMENTS AI e send copies.) s by various individ JTARY PERSONNEL FIL EAR BEFORE THE BOAI T NO EXPENSE TO THE (NOTE: The N	ved had I beer record with th DD/ N, OR EVIDENC RE SUBMITTED uals whom I s E AND ANY ADD RD. GOVERNMENT I GOVERNMENT I avy Discharge Re	a in a difference miliatry.	ENT Squadron no charges ICE: (Continue in Item 17. while in the military. UMENTATION BOARD IN THE AVELING PANEL CLOSEST TO coes not have a traveling panel
TYPE OF REVIEW REQUESTED (X one) CONDUCT A RECORD REVIEW OF MY DISCH SUBMITTED BY ME. I AND/OR (counsel/representative) WISH TO A WASHINGTON, D.C. METROPOLITAN AREA. I AND/OR (counsel/representative) WISH TO A WASHINGTON, D.C. METROPOLITAN AREA. I AND/OR (counsel/representative) WISH TO A WASHINGTON, D.C. METROPOLITAN AREA. I AND/OR (counsel/representative) WISH TO A	efore the court-martia ention of legal. I had AS PREVIOUSLY SUBN ADD ADDITIONAL ISS E FOLLOWING ATTACH levent to your case, please Character Statements Character Statements ARGE BASED ON MY MIL esentative/ WILL NOT APP APPEAR AT A HEARING A APPEAR AT A HEARING A IME (Last, First, Middle In	al date. I also belie a very exemplified MITTED ON (YYYYMM UES, JUSTIFICATION HED DOCUMENTS AI e send copies.) s by various individ JTARY PERSONNEL FIL EAR BEFORE THE BOAI T NO EXPENSE TO THE (NOTE: The N	ved had I beer record with th DD/ N, OR EVIDENC RE SUBMITTED uals whom I s E AND ANY ADD RD. GOVERNMENT I avy Discharge Re b. TELEPHONE	A in a difference miliatry. E. AS EVIDEN Served with Served with DITIONAL DOC BEFORE THE I BEFORE A TR. Wiew Board do E NUMBER (Inc.	CUMENTATION BOARD IN THE AVELING PANEL CLOSEST TO coses not have a traveling panel clude Area Code)
Yould have even been brought to the attername 7. (X if applicable) AN APPLICATION W/ AND THIS FORM IS SUBMITTED TO IN SUPPORT OF THIS APPLICATION, THIS If military documents or medical records are relevant Opies of Enlisted Performance Reports, TYPE OF REVIEW REQUESTED (X one) CONDUCT A RECORD REVIEW OF MY DISCH SUBMITTED BY ME. 1 AND/OR (counsel/representative) WISH TO A VASHINGTON, D.C. METROPOLITAN AREA. I AND/OR (counsel/representative) WISH TO A (enter city and state) a. COUNSEL/REPRESENTATIVE (If any) NA (See Item 10 of the instructions about couns APPLICANT MUST SIGN IN ITEM 13.a. E DEATH OR INCOMPETENCY MUST ACC	efore the court-martia ention of legal. I had AS PREVIOUSLY SUBM ADD ADDITIONAL ISS E FOLLOWING ATTACH levant to your case, please Character Statements Character Statements ARGE BASED ON MY MIL scentative/ WILL NOT APP APPEAR AT A HEARING A APPEAR AT A HEARING A ME (Last, First, Middle In scel/representative.)	al date. I also belie a very exemplified AITTED ON (YYYYMM UES, JUSTIFICATION HED DOCUMENTS AI e send copies.) s by various individ UTARY PERSONNEL FIL EAR BEFORE THE BOAH T NO EXPENSE TO THE (NOTE: The N itial) AND ADDRESS	ved had I beer record with th DD/ N, OR EVIDENC RE SUBMITTED uals whom I s E AND ANY ADD RD. GOVERNMENT I avy Discharge Re b. TELEPHONE c. E-MAIL d. FAX NUMBI	A in a differ- ne miliatry.	ent squadron no charges ICE: (Continue in Item 17. while in the military. UMENTATION BOARD IN THE AVELING PANEL CLOSEST TO coss not have a traveling panel clude Area Code) rea Code)
Yould have even been brought to the atternoised in the atternoised in the second se	efore the court-martia ention of legal. I had AS PREVIOUSLY SUBM ADD ADDITIONAL ISS E FOLLOWING ATTACK levant to your case, please Character Statements Character Statements ARGE BASED ON MY MILL NOT APP APPEAR AT A HEARING A APPEAR AT A HEARING A AME (Last, First, Middle In sel/representative.) BELOW. If the record in OMPANY THE APPLIC.	al date. I also belie a very exemplified AITTED ON (YYYYMM UES, JUSTIFICATION HED DOCUMENTS AI e send copies.) S by various individ JTARY PERSONNEL FIL S by various individ UTARY PERSONNEL FIL EAR BEFORE THE BOAI T NO EXPENSE TO THE (NOTE: The N (NOTE: The N) (NOTE: The N) (N) (N) (N) (N) (N) (N) (N) (N) (N) (ved had I beer record with th DD/ N, OR EVIDENC RE SUBMITTED uals whom I s E AND ANY ADD RD. GOVERNMENT I GOVERNMENT I avy Discharge Re b. TELEPHONE c. E-MAIL d. FAX NUMBI a deceased or in atton is signed I by marking a b	a in a differ- ne miliatry. E. DAS EVIDEN Served with DITIONAL DOC BEFORE THE I BEFORE A TR DVIEW Board do ENUMBER (Include Ar Incompetent by other that ox below.	ent squadron no charges ICE: (Continue in Item 17. while in the military. UMENTATION BOARD IN THE AVELING PANEL CLOSEST TO bes not have a traveling panel clude Area Code) rea Code) person, LEGAL PROOF OF in the applicant, indicate
AND THIS FORM IS SUBMITTED TO IN SUPPORT OF THIS APPLICATION, THI If military documents or medical records are re- topics of Enlisted Performance Reports, TYPE OF REVIEW REQUESTED (X one) CONDUCT A RECORD REVIEW OF MY DISCH SUBMITTED BY ME. I AND/OR (counsel/representative) WISH TO A WASHINGTON, D.C. METROPOLITAN AREA. I AND/OR (counsel/representative) WISH TO A (enter city and state) .a. COUNSEL/REPRESENTATIVE (If any) NA (See Item 10 of the instructions about counse APPLICANT MUST SIGN IN ITEM 13.a. E DEATH OR INCOMPETENCY MUST ACC the name (print) SPOUSE WIDOW WIDOWER a. CURRENT MAILING ADDRESS OF APPLI	efore the court-martia ention of legal. I had AS PREVIOUSLY SUBM ADD ADDITIONAL ISS E FOLLOWING ATTACH levant to your case, please Character Statements Character Statements Exercised WILL NOT APP APPEAR AT A HEARING A APPEAR AT A HEARING A IME (Last, First, Middle In Sel/representative.) BELOW. If the record in COMPANY THE APPLIC, NEXT OF KIN ICANT OR PERSON AE	al date. I also belie a very exemplified AITTED ON (YYYYMM UES, JUSTIFICATION HED DOCUMENTS AI e send copies.) S by various individ JTARY PERSONNEL FIL S by various individ UTARY PERSONNEL FIL EAR BEFORE THE BOAI T NO EXPENSE TO THE (NOTE: The N (NOTE: The N) (NOTE: The N) (N) (N) (N) (N) (N) (N) (N) (N) (N) (ved had I beer record with th DD/ N, OR EVIDENC RE SUBMITTED uals whom I s E AND ANY ADD RD. GOVERNMENT I GOVERNMENT I ay Discharge Ra b. TELEPHONE c. E-MAIL d. FAX NUMBI a deceased or in ation is signed I by marking a b	A in a differ- ne miliatry. E. D AS EVIDEN Served with Served with DITIONAL DOC BEFORE THE I BEFORE A TR. Wiew Board do ENUMBER (Include Ar Incompetent by other that ox below. THER (Specify)	ent squadron no charges ICE: (Continue in Item 17. while in the military. UMENTATION BOARD IN THE AVELING PANEL CLOSEST TO bes not have a traveling panel clude Area Code) rea Code) person, LEGAL PROOF OF in the applicant, indicate
Vould have even been brought to the atter 7. (X if applicable) AN APPLICATION W, AND THIS FORM IS SUBMITTED TO IN SUPPORT OF THIS APPLICATION, THI If military documents or medical records are re. Copies of Enlisted Performance Reports, TYPE OF REVIEW REQUESTED (X one) CONDUCT A RECORD REVIEW OF MY DISCH SUBMITTED BY ME. I AND/OR (counsel/representative) WISH TO A WASHINGTON, D.C. METROPOLITAN AREA. I AND/OR (counsel/representative) WISH TO A (foursel/representative) WISH TO A (see Item 10 of the instructions about counse APPLICANT MUST SIGN IN ITEM 13.a. E DEATH OR INCOMPETENCY MUST ACC the name (print) SPOUSE WIDOW WIDOWER	efore the court-martia ention of legal. I had AS PREVIOUSLY SUBM ADD ADDITIONAL ISS E FOLLOWING ATTACH levant to your case, please Character Statements Character Statements Exercised WILL NOT APP APPEAR AT A HEARING A APPEAR AT A HEARING A IME (Last, First, Middle In Sel/representative.) BELOW. If the record in COMPANY THE APPLIC, NEXT OF KIN ICANT OR PERSON AE	al date. I also belie a very exemplified AITTED ON (YYYYMM UES, JUSTIFICATION HED DOCUMENTS AI e send copies.) S by various individ JTARY PERSONNEL FIL S by various individ UTARY PERSONNEL FIL EAR BEFORE THE BOAI T NO EXPENSE TO THE (NOTE: The N (NOTE: The N) (NOTE: The N) (N) (N) (N) (N) (N) (N) (N) (N) (N) (ved had I beer record with th DD/ N, OR EVIDENC RE SUBMITTED uals whom I s E AND ANY ADD RD. GOVERNMENT I GOVERNMENT I ay Discharge Ra b. TELEPHONE c. E-MAIL d. FAX NUMBI a deceased or in ation is signed I by marking a b	A in a differ- ne miliatry. E. D AS EVIDEN Served with Served with DITIONAL DOC BEFORE THE I BEFORE A TR. Wiew Board do ENUMBER (Include Ar Incompetent by other that ox below. THER (Specify)	ent squadron no charges ICE: (Continue in Item 17. while in the military. UMENTATION BOARD IN THE AVELING PANEL CLOSEST TO coes not have a traveling panel clude Area Code) rea Code) person, LEGAL PROOF OF n the applicant, indicate
Volid have even been brought to the atter 7. (X if applicable) AN APPLICATION W, AND THIS FORM IS SUBMITTED TO IN SUPPORT OF THIS APPLICATION, THI If military documents or medical records are re- Copies of Enlisted Performance Reports, TYPE OF REVIEW REQUESTED (X one) CONDUCT A RECORD REVIEW OF MY DISCH SUBMITTED BY ME. I AND/OR (counsel/representative) WISH TO A WASHINGTON, D.C. METROPOLITAN AREA. I AND/OR (counsel/representative) WISH TO A (enter city and state) .a. COUNSEL/REPRESENTATIVE (If any) NA (See Item 10 of the instructions about counse APPLICANT MUST SIGN IN ITEM 13.a. E DEATH OR INCOMPETENCY MUST ACC the name (print) SPOUSE WIDOW WIDOWER a. CURRENT MAILING ADDRESS OF APPL	efore the court-martia ention of legal. I had AS PREVIOUSLY SUBM ADD ADDITIONAL ISS E FOLLOWING ATTACH levant to your case, please Character Statements Character Statements Exercised WILL NOT APP APPEAR AT A HEARING A APPEAR AT A HEARING A IME (Last, First, Middle In Sel/representative.) BELOW. If the record in COMPANY THE APPLIC, NEXT OF KIN ICANT OR PERSON AE	al date. I also belie a very exemplified AITTED ON (YYYYMM UES, JUSTIFICATION HED DOCUMENTS AI e send copies.) S by various individ JTARY PERSONNEL FIL S by various individ UTARY PERSONNEL FIL EAR BEFORE THE BOAI T NO EXPENSE TO THE (NOTE: The N (NOTE: The N) (NOTE: The N) (N) (N) (N) (N) (N) (N) (N) (N) (N) (ved had I beer record with th DD/ N, OR EVIDENC RE SUBMITTED uals whom I s BOVERNMENT I GOVERNMENT I avy Discharge Re b. TELEPHONE c. E-MAIL d. FAX NUMBI a deceased or in attion is signed I by marking a b FATIVE 0 b. TELEPHONE	A in a difference miliatry. The mil	ent squadron no charges ICE: (Continue in Item 17. While in the military. UMENTATION BOARD IN THE AVELING PANEL CLOSEST TO Des not have a traveling panel Clude Area Code) rea Code) person, LEGAL PROOF OF In the applicant, indicate
Vould have even been brought to the atter 7. (X if applicable) AN APPLICATION W, AND THIS FORM IS SUBMITTED TO IN SUPPORT OF THIS APPLICATION, THI If military documents or medical records are records of Enlisted Performance Reports, Copies of Enlisted Performance Reports, TYPE OF REVIEW REQUESTED (X one) CONDUCT A RECORD REVIEW OF MY DISCH SUBMITTED BY ME. 1 AND/OR (counsel/representative) WISH TO A WASHINGTON, D.C. METROPOLITAN AREA. I AND/OR (counsel/representative) WISH TO A fenter city and state) a. COUNSEL/REPRESENTATIVE (If any) NA (See Item 10 of the instructions about counse APPLICANT MUST SIGN IN ITEM 13.a. E DEATH OR INCOMPETENCY MUST ACC the name (print) SPOUSE WIDOW WIDOWER a. CURRENT MAILING ADDRESS OF APPL (Forward notification of any change in address (Forward no	efore the court-martia ention of legal. I had AS PREVIOUSLY SUBM ADD ADDITIONAL ISS E FOLLOWING ATTACH levant to your case, please Character Statements Character Statements ARGE BASED ON MY MIL Issentative/ WILL NOT APP APPEAR AT A HEARING A APPEAR AT A HEARING A AME (Last, First, Middle In sel/representative.) BELOW. If the record in OMPANY THE APPLIC. NEXT OF KIN ICANT OR PERSON AE ss./	al date. I also belie a very exemplified AITTED ON (YYYYMM UES, JUSTIFICATION HED DOCUMENTS AI e send copies.) s by various individ JTARY PERSONNEL FIL EAR BEFORE THE BOAI T NO EXPENSE TO THE (NOTE: The N itial) AND ADDRESS h and relationship LEGAL REPRESENT SOVE	ved had I beer record with th DD/ N, OR EVIDENC RE SUBMITTED uals whom I s E AND ANY ADD RD. GOVERNMENT I GOVERNMENT I avy Discharge Ra b. TELEPHONE c. E-MAIL d. FAX NUMBI a deceased or in ation is signed I by marking a b rATIVE of b. TELEPHONE c. E-MAIL d. FAX NUMBI	A in a difference miliatry. DEC. DAS EVIDEN Served with Served with SEFORE THE I BEFORE THE I BEFORE A TR. Wiew Board do ER (Include Ar Incompetent by other that ox below. HER (Specify), NUMBER (Include Ar BER (Include Ar Competent Ar NUMBER (Include Ar Competent Ar NUMBER (Include Ar Competent Ar Comp	ent squadron no charges ICE: (Continue in Item 17. While in the military. CUMENTATION BOARD IN THE AVELING PANEL CLOSEST TO Coes not have a traveling panel Clude Area Code) rea Code) rea Code) rea Code) rea Code) Case NUMBER CASE NUMBER cont write in this space.)
AND THIS FORM IS SUBMITTED TO AND THIS FORM IS SUBMITTED TO IN SUPPORT OF THIS APPLICATION, THE If military documents or medical records are re- Copies of Enlisted Performance Reports, CONDUCT A RECORD REVIEW OF MY DISCH SUBMITTED BY ME. 1 AND/OR (counsel/repre- I AND/OR (counsel/representative) WISH TO A WASHINGTON, D.C. METROPOLITA AREA. I AND/OR (counsel/representative) WISH TO A (enter city and state) O.a. COUNSEL/REPRESENTATIVE (If any) NA (See Item 10 of the instructions about counsel A SPULCANT MUST SIGN IN ITEM 13.a. E DEATH OR INCOMPETENCY MUST ACC the name (print) SPOUSE WIDOW WIDOWER 2.a. CURRENT MAILING ADDRESS OF APPL (Forward notification of any change in address (See Item 10 of the wilfully meking a f penalties involved for wilfully meking a f	efore the court-martia ention of legal. I had AS PREVIOUSLY SUBM ADD ADDITIONAL ISS E FOLLOWING ATTACH levant to your case, please Character Statements Character Statements ARGE BASED ON MY MIL Issentative/ WILL NOT APP APPEAR AT A HEARING A APPEAR AT A HEARING A AME (Last, First, Middle In sel/representative.) BELOW. If the record in OMPANY THE APPLIC. NEXT OF KIN ICANT OR PERSON AE ss./	al date. I also belie a very exemplified AITTED ON (YYYYMM UES, JUSTIFICATION HED DOCUMENTS AI e send copies.) s by various individ JTARY PERSONNEL FIL EAR BEFORE THE BOAI T NO EXPENSE TO THE (NOTE: The N itial) AND ADDRESS h and relationship LEGAL REPRESENT SOVE	ved had I beer record with th DD/ N, OR EVIDENC RE SUBMITTED uals whom I s E AND ANY ADD RD. GOVERNMENT I GOVERNMENT I avy Discharge Ra b. TELEPHONE c. E-MAIL d. FAX NUMBI a deceased or in ation is signed I by marking a b rATIVE of b. TELEPHONE c. E-MAIL d. FAX NUMBE c. E-MAIL d. FAX NUMBE	A in a difference miliatry. DEC. DAS EVIDEN Served with Served with SEFORE THE I BEFORE THE I BEFORE A TR. Wiew Board do ER (Include Ar Incompetent by other that ox below. HER (Specify), NUMBER (Include Ar BER (Include Ar Competent Ar NUMBER (Include Ar Competent Ar NUMBER (Include Ar Competent Ar Comp	ent squadron no charg ICE: (Continue in Item 17. While in the military. UMENTATION BOARD IN THE AVELING PANEL CLOSEST oes not have a traveling pa clude Area Code) ea Code) person, LEGAL PROOF (n the applicant, indicate (clude Area Code) EasCode) CASE NUMBER

14. CONTINUATION OF ITEM 6, ISSUES (If applicable)

I never received any letters of counseling, Letters of Reperminds, or Article of 15. I was devouted to the military, and just made some bad financial decisions, and not telling my superisors or commanders about these difficulties. I also believed that if I had a more experience Aera Defense Council I would not have been brought up on any of the charges.

15. CONTINUATION OF ITEM 8, SUPPORTING DOCUMENTS (If applicable)

16. REMARKS (If applicable)

MAIL COMPLETED APPLICATIONS TO APPROPRIATE ADDRESS BELOW.

ARMY

Army Review Boards Agency Support Division, St. Louis 9700 Page Avenue St. Louis, MO 63132-5200 (See http://arba.army.pentagon.mil)

AIR FORCE

Air Force Review Boards Agency SAF/MRBR 550-C Street West, Suite 40 Randolph AFB, TX 78150-4742

DD FORM 293, MAR 2004

LH00-100201

NAVY AND MARINE CORPS

Naval Council of Personnel Boards 720 Kennon Street, S.E. Room 309 (NDRB) Washington Navy Yard, DC 20374-5023

COAST GUARD

U.S. Coast Guard Commandant (G-WPM) 2100 Second Street, S.W. Room 5500 Washington, DC 20593

Page 2 of 4 Pages

FD 2004-00417

			CHARGE SHEET		
		······································	L PERSONAL DATA	•••	
1. NAME OF ACCUSED			2. SSN	3. GRADE OR BANK Staff Sergeant	4. PAY GRADE E-5
. UNIT OR ORGANIZAT	FION		· · · ·	6. CURRENT SERVICE	
	port Squadron (ACC)			a. INITIAL DATE	b. TERM
Seymour Johnso	on Air Force Base, Nort	h Carolina	· · · ·	20 Nov 1998	. 4
PAY PER MONTH			B. NATURE OF RESTRAINT OF ACCUSED	9. DATE(S) IMPOSED	
a. BASIC	b. SEA/FOREIGN DUTY	C.TOTAL	None		
\$1,888.50	\$0.00	\$1,888.50			
		- I'	1. CHARGES AND SPECIFICATIONS		· · · · · · · · · · · · · · · · · · ·
0. CHARGE I	Violation of the UCM	IJ, Article 123a	· · · · · · · · · · · · · · · · · · ·		

Specification 1: In that STAFF SERGEANT **Control of the set of the**

 Date
 Check #
 Amount

 ! Jan 01
 5065
 \$550.00

 Peb 01
 5069
 \$2,659.74

of a total amount of \$3,209.74, drawn upon the Branch Banking & Trust Bank, made payable to the order of Bank of America, and igned to the order of Bank of America, and igned to the sufficient funds in or credit with aid bank for the payment of said checks in full upon their presentment.

Specification 2: In that STAFF SERGBANT did at or near Seymour Johnson Air Force, 4th Medical Support Squadron, Seymour Johnson Air Force Base, North Carolina, did, at or near Seymour Johnson Air Force Base, North Carolina, on divers ccasions, between on or about 5 April 2001 and on or about 6 April 2001, with intent to defraud and for the procurement of lawful urrency and/or articles of value, wrongfully and unlawfully utter to the Army & Air Force Exchange Service, certain checks for the ayment of money drawn upon the Branch Banking & Trust Bank, as follows:

Jate	Check #	Amount
Apr 01	5142	\$420.50
Apr 01	5143	\$300.00
Apr 01	5165	\$420.50

		IIL PREFERRAL		
12. NAME OF ACCUSER (Last, First, MI)		b. GRADE	C. DRGANIZATION OF ACCUSER	······································
a second and the second second second second second	• •	Lt Col	4th Medical Support Squadron	
SIGNATURE OF ACCUSER		to the target	e. DATE	· · · · · · · · · · · · · · · · · · ·
				27 Aug 2001
the second s	A state of the second state of the	Constant State of Sta	- · · · · · · · · · · · · · · · · · · ·	

AFFIDAVIT: Before me, the undersigned, authorized by law to administer oath in cases of this character, personally appeared the above named accuser this 27 day of August, 2001, and signed the foregoing charges and specifications under oath that he/she is a person subject to the Uniform Code of Military Justice and that he/she either has personal knowledge of or has investigated the matters set forth therein and that the same are true to the best of his/her knowledge and belief.

	4th Fighter Wing		
Typea Name of Officer	Organization of Officer		
Captain	Judge Advocate		
Grade	Official Capacity to Administer Oath		
and the second	(See R.C.M. 307(b)(1) – must be commissioned officer)		
Signature	· .		
FORM 458, MAY 2000 PREVIOUS EDITION IS	S OBSOLETE.		

FD 2004-00417

	CHARGE SHEET (Continuation)		
1. NAME OF ACCUSED (Last, First, MI)		2. SSN	
	CHARGES AND SPECIFICATIONS	<u> </u>	and a second

5 Apr 01 5166 \$300.00

of a total amount of \$1,441.00, and signed **and the second state of the** then knowing that she, the maker thereof, did not or would not have sufficient funds in or credit with said bank for the payment of said checks in full upon their presentment.

Specification 3: In that STAFF SERGEAN **provide a state of the states** Air Force, 4th Medical Support Squadron, Seymour Johnson Air Force Base, North Carolina, did, at or near Seymour Johnson Air Force Base, North Carolina, on or about 9 April 2001, with intent to defraud and for the procurement of lawful currency and/or articles of value, wrongfully and unlawfully make and utter to the Army & Air Force Exchange Service, certain checks for the payment of money drawn upon Seymour Johnson Federal Credit Union, as follows:

 Date
 Check #
 Amount

 Apr 01
 5071
 \$300.00

 Apr 01
 5072
 \$677.00

of a total amount of \$977.00, and signed the second second then knowing that she, the maker thereof, did not or would not have ufficient funds in or credit with said bank for the payment of said checks in full upon their presentment.

pecification 4: In that STAFF SERGEANT **Construction of the Second United** States Air Force, 4th Medical Support Squadron, (eymour Johnson Air Force Base, North Carolina, did, at or near Seymour Johnson Air Force Base, North Carolina, on or about 9 (fay 2001, with intent to defraud and for the procurement of articles of value, wrongfully and unlawfully make and utter to Outdoor (ccreation, a certain check for the payment of money drawn upon Seymour Johnson Federal Credit Union, as follows:

 Date
 Check #
 Amount

 May 01 5029
 \$520.00

f a total amount of \$520.00, and signed and the payment of said check in full upon its presentment.

HARGE II Violation of the UCMJ, Article 134

pecification: In that STAFF SERGEANT being indebted to Nations Bank in the sum of \$3,073.55 for charges incurred on her wernment credit card, which amount became due and payable between on or about 1 January 2001 and on or about 3 April 2001, did, or near Seymour Johnson Air Force Base, North Carolina, from on or about 1 January 2001 to on or about 3 April 2001, did, shonorably fail to pay said debt.