

INFORMAL LINE OF DUTY DETERMINATION

Authority: Principal Purposes(s): Routine Uses: Disclosure statements

TO(Reserve Unit Commander):

FROM(AD MTF/Reserve Medical Unit):

1. MEMBER'S NAME (Last, First, Middle Initial)

2. SSAN

3. GRADE

4. ORGANIZATION/UNIT

5. Medical Section: Name/Address medical facility providing initial treatment.

Date and time of initial treatment:

Diagnosis:

Date

Typed Rank/Name Medical Officer

Signature

6. Unit Section: At the time of this occurrence the member was on (check all that apply):

Active Duty Status: Start date _____ End date _____

Inactive Duty Status:

UTA AFTP Saturday night rule Travel to/from duty Unit sponsored event Other (provide details below)

As a result of my investigation, I have determined the circumstances to be as follows:

Recommended Finding:

In Line of Duty(ILOD) EPTS-LOD not Applicable Not ILOD-Due to Own Misconduct
 EPTS-Service Aggravated Not ILOD-Not Due to Own Misconduct Recommend Formal LOD Investigation

Date

Typed Rank/Name Unit Commander

Signature

7. Staff Judge Advocate Section: Concur Nonconcur-New Recommended Finding:

In line of Duty(ILOD) EPTS-LOD not Applicable Not ILOD-Due to Own Misconduct
 EPTS-Service Aggravated Not ILOD-Not Due to Own Misconduct Recommend Formal LOD Investigation

Date

Typed Rank/Name SJA

Signature

8. Appointing Authority Decision:

In Line of Duty(ILOD) EPTS-LOD not Applicable Not ILOD-Due to Own Misconduct
 EPTS-Service Aggravated Not ILOD-Not Due to Own Misconduct Formal Investigation
 Forward HQ AFRC LOD Board

Date

Typed Rank/Name Appointing Authority

Signature

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The traditional Field-by-Field creation process is extremely ineffective and slow.

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ITAOP savePDF method proved to be very simple and completely reliable for millions of users all over the world (incl. individuals, companies, organizations, government employees).

9. Air Force Reserve Command LOD Board Review:

9A. Medical Review

<i>Date</i>	<i>Typed Rank/Name</i>	<i>Signature</i>
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9B. Legal Review:

<i>Date</i>	<i>Typed Rank/Name</i>	<i>Signature</i>
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AFRC LOD Board Action:

- | | |
|---|--|
| <input type="checkbox"/> <i>In Line of Duty</i> | <input type="checkbox"/> <i>Formal Investigation</i> |
| <input type="checkbox"/> <i>EPTS-Service Aggravated</i> | <input type="checkbox"/> <i>Forward to Approving Authority</i> |

10. LOD Board Administrator:

<i>Date</i>	<i>Typed Rank/Name</i>	<i>Signature</i>
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11. Approving Authority Decision:

- | | | |
|---|--|--|
| <input type="checkbox"/> <i>In Line of Duty</i> | <input type="checkbox"/> <i>EPTS-LOD Not Applicable</i> | <input type="checkbox"/> <i>Not ILOD-Due to Own Misconduct</i> |
| <input type="checkbox"/> <i>EPTS-Service Aggravated</i> | <input type="checkbox"/> <i>Not ILOD-Not Due to Own Misconduct</i> | <input type="checkbox"/> <i>Formal Investigation</i> |

<i>Date</i>	<i>Typed Rank/Name</i>	<i>Signature</i>
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