



## UNIT 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 you 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.

**TO: UNIT COMMANDER, BN S1, PAC SUPERVISOR:** This soldier is scheduled to PCS or transition, separate or retire from the Active Army. In order to ensure proper installation clearance and properly compute the soldier's final leave and pay entitlements, we require your assistance. Complete items below identifying actions within the last 60 days prior to the soldier's separation or retirement date. Items marked with an @ are required for all soldiers transitioning, separating, or retiring from the Active Army. Items marked with an asterisk (\*) are required for soldiers PCSing. This information must be provided, confirmed and hand-carried by the soldier or appointed representative to the Military Pay Station and the Out-Processing Control Station for final processing. Failure to provide this information will cause the withholding of 45 percent of the soldier's final pay at transition, separation or retirement, pending Defense Finance and Accounting System (DFAS) final verification of outstanding transactions.

### SECTION A - PERSONAL DATA *(To be completed by commander, S1, out-processing control station, or appointed official)*

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

### SECTION B - DEBT VERIFICATIONS

10. DUTY STATUS@	10a. TYPE OF ABSENCE	10b. LOG NUMBER OR ORDER NUMBER <i>(WHEN APPLICABLE)</i>	10c. START DATE	10d. RETURN DATE
INDICATE ALL LEAVES, TDY, HOSPITALIZATION, FIELD DUTY, LOST TIME, AWOL, AND CONFINEMENT WITHIN 60 DAYS PRIOR TO ISSUANCE OF CLEARANCE FORMS.				

SECTION B - DEBT VERIFICATIONS (cont.)					
11. <b>ADVERSE ACTIONS@</b> All that have occurred within the 60 days prior to issuance of DA FORM 137-R series. INCLUDE: UCMJ, Court Martial, Admin. Reductions, and Administrative Discharges.	11a. TYPE OF ACTION	11b. DATE OF SOURCE DOCUMENT	11c. PUNISHMENT	11d. EFFECTIVE DATE	11e. COMPLETION DATE
12. <b>PROPERTY ACCOUNTABILITY@</b>	12a. STATEMENT OF CHARGES <input type="checkbox"/>	12b. DATE OF SOURCE DOCUMENT	12c. AMOUNT	12d. DISPOSITION	
	12e. REPORT OF SURVEY <input type="checkbox"/>				
13. <b>SPECIAL PAYS@*</b>	MARK ALL THAT APPLY: <input type="checkbox"/> SDAP <input type="checkbox"/> FLPP <input type="checkbox"/> JUMP <input type="checkbox"/> DEIP <input type="checkbox"/> SEA <input type="checkbox"/> DEMOLITION <input type="checkbox"/> FLIGHT <input type="checkbox"/> OTHER _____				
SECTION C - UNIT / BATTALION CLEARANCES@*					
14. <b>BN S1/Unit Commander</b> VERIFYING OFFICIAL	14a. TYPE OR PRINT NAME		14b. SIGNATURE		14c. DATE
EVALUATIONS	MEAL CARD		PROFILE		
DUTY ROSTER	MAIL ROOM				
DA FORM 31	FLAGGED				
15. <b>BN S2/3/Unit Commander</b> VERIFYING OFFICIAL	15a. TYPE OR PRINT NAME		15b. SIGNATURE		15c. DATE
SECURITY DEBRIEFING	ANTI-TERRORISM BRIEFING		TRAINING ROOM		TRAINING RECORD
16. <b>BN S4/Unit Commander</b> 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. <b>NAME OF COMMANDER/S1</b> <b>AUTHENTICATING OFFICIAL</b>	19a. SIGNATURE		19b. DATE		