	INSPECT For use of this form, see AR 20			CTION REQUE			
	DATA RE	QUIRED BY	THE PRI	ACY ACT OF 197	4	,	
AUTHORITY: PRINCIPAL PURPOSE:	10 U.S.C. 7013, Secretary of the Army; 10 U.S.C. 7020, Inspector General; Inspector General Act of 1978, Public Law 95-452, 92 Stat. 1101 (1978), as amended; DoDD 1030.1, Victim and Witness Assistance; AR 20-1, Inspector General Activities and Procedures.  To secure information sufficient to inquire into the matters presented, to take action to correct deficiencies, and to respond						
	to requesters.						
ROUTINE USES:	Information is used for official purposes within the Department of Defense; to answer complaints or respond to requests for assistance, advice, or information; by Members of Congress and other Government agencies when determined by the Inspector General to be in the best interest of the Army; and, in certain cases, in trials by court-martial and other military matters as authorized by the Uniform Code of Military Justice.						
DISCLOSURE:	Voluntary. However, failure to provide complete information may hinder proper identification of the requester, accomplishment of the requested action(s), and response to the requester.  A0020-1 SAIG, Inspector General Records (January 11, 2002, 67 FR 1447)						
SORN:		·					
1. LAST, FIRST, MIDDLE	INITIAL	2. GRADE	/ RANK	3. DOD ID	4. COMPONENT /	DUTY STATUS	
5. PREFERRED CONTAC	TTELEPHONE (Duty, home, and /	or cell)	6. E-I	MAIL ADDRESS(ES	5)	,	
7. UNIT AND COMPLETE M	ILITARY ADDRESS (Point of Contact/Tele	ephone if applical	ble) 8. PR	EFERRED MAILING	ADDRESS (If different from milita	ary address, including ZIP Code)	
,							
9. SPECIFIC ACTION RE	QUESTED (What do you want the IG	to do for you?	")				
10. HAVE YOU CONTACT	TED YOUR CHAIN OF COMMAN	D OR ANY A	GENCY (	CONCERNING THI	S REQUEST? (Explain for I	ooth yes and no responses.)	
Yes							
☐ No							
11. INFORMATION PERT	AINING TO THIS REQUEST (Be	specific and	detailed. i	List any supporting	documentation or enclosu	res if applicable.)	
					,		
						•	
						,	
servanores						No. of the second secon	
-					-		
						-	
						,	
			1				
						ч	
				•			
12. I do I do not consent to release my personal information outside of IG channels to the chain of command or other officials (but within DoD channels) in order to resolve the matters listed above. I understand that if I do not consent to the release of my personal information, my request for assistance may go unresolved.							
13. I do I do not consent to release the supporting documents I provided to the IG (to exclude this DA Form) outside of IG channels to the chain of command or other officials (but within DoD channels) in order to resolve the matters listed above. I understand that if I do not consent to the release of my documents, my request for assistance may go unresolved.							
This information is submitted for the basic purpose of requesting assistance, correcting injustices affecting the individual, or eliminating conditions considered detrimental to the efficiency or reputation of the Army. Those who knowingly and intentionally provide false statements on this form are subject to potential punitive and administrative action (UCMJ Art 107, 18 U.S.C 1001).							
14. SIGNATURE			15. DAT	E (YYYYMMDD)	16. IG / INTAKE REMAR	KS	

**DA FORM 1559, APR 2021** 

## CUI

			COMPONENT / DUTY STATUS	
11. INFORMATION PERTAINING TO THIS REQUEST (Be	specific and detailed.	List any supporting o	documentation or enclosures if applicable.)	
	,			
			,	
	,		,	
· · · · · · · · · · · · · · · · · · ·				
		,		
			·	
•				
		- · · · · · · · · · · · · · · · · · · ·	·	
		· · · · · · · · · · · · · · · · · · ·		
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
	:			
-				
		,		
		· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	
·				
INITIALS	DATE (YYYYMMD)	 D)		
			Page 2 of 2	