

**PLEASE COMPLETE THIS ATTACHMENT AND RETURN WITH YOUR SOR RESPONSE**

NAME: \_\_\_\_\_

LAST 4 OF SSN: \_\_\_\_\_

CASE NO: \_\_\_\_\_

I am requesting (initial one of the following choices):

\_\_\_\_\_ **In-person at a location within 150 miles of your home or workplace, or by video teleconference (VTC) hearing before an Administrative Judge;**

**or,**

\_\_\_\_\_ **A decision based on the administrative (written) record, without a hearing before an Administrative Judge.** This will include a memo prepared by DoD Department Counsel. You will have an opportunity to respond to the memo and to provide documents or other evidence before the record is submitted to the Administrative Judge for decision.

Telephone No. (used during normal business hours) \_\_\_\_\_

Email address (used during normal business hours) \_\_\_\_\_

Current mailing address: \_\_\_\_\_

I swear (or affirm) that my response to the Statement of Reasons and the information furnished above is true and correct to the best of my knowledge and belief.

Signature \_\_\_\_\_

Subscribed and sworn to before me, a person authorized by law to administer oaths, on this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
(SEAL)