

Office of the State Public Defender

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Información Sobre Nueva Sentencia Para Veteranos **SB 1209**

SB 1209 es una nueva ley que afecta a los veteranos con condenas por delitos graves y que regirá a partir del 1 de enero de 2023. SB 1209 cambia la sección 1170.91 del Código Penal. Permite a las personas que han sido miembros de las fuerzas armadas, pedir a un tribunal que los vuelva a condenar a menos tiempo. La ley se aplica a las personas que actualmente están sirviendo en las fuerzas armadas. También se aplica a las personas que fueron parte de las fuerzas armadas. Para obtener los beneficios de esta nueva ley, la persona debe haber experimentado un trauma o otra condición que esté relacionada con su servicio militar.

Se adjunta una copia de la ley y una petición de muestra. Por favor lea ambos cuidadosamente. Si usted cree que es elegible, puede completar la petición adjunta y pedirle a la corte que lo vuelva a sentenciar.

¿QUIÉN PUEDE SOLICITAR UNA NUEVA SENTENCIA BAJO LA LEY SB 1209?

Para poder hacer uso de la nueva ley, la persona debe tener:

- (1) Haber sido miembros de las fuerzas armadas de los Estados Unidos.
- (2) Tener una condición o trauma relacionado con su servicio militar.
- (3) El tribunal no pensó en esos temas cuando fueron sentenciados.

Trauma o condición significa tener al menos uno de los siguientes:

- Trauma sexual
- Lesión cerebral traumática
- Trastorno de estrés postraumático
- Abuso de sustancias
- Problemas de salud mental.

Personas que se encuentran cumpliendo una determinada condena (tienen condena menor, mediana o mayor) o que están en libertad condicional, libertad preparatoria, supervisión comunitaria posterior a la liberación o supervisión obligatoria puede presentar una petición de nueva sentencia. La nueva ley también se aplica a las personas que están cumpliendo cadena perpetua con posibilidad de libertad condicional.

¿QUÉ VETERANOS NO PUEDEN UTILIZAR ESTA LEY?

No todos los que han sido miembros de las fuerzas armadas pueden pedirle al juez que los vuelva a sentenciar bajo esta nueva ley. Las personas que están obligadas a registrarse como delincuentes sexuales o que han sido condenadas por algunos delitos especiales no pueden usar la nueva ley. Puede encontrar una lista de esas condenas en la sección de Preguntas Frecuentes de este folleto.

¿QUÉ PUEDE HACER EL JUEZ?

El juez tiene el poder para decidir cuál debe ser la nueva sentencia. Al decidir la nueva sentencia, el juez tiene que considerar si la persona tuvo algún trauma durante el tiempo en el que participó en las fuerzas armadas, tales como problemas de salud mental o trastorno de estrés postraumático (TEPT).

El juez no puede extender la sentencia de la persona. El juez puede:

- Reducir la sentencia
- Cambiar los cargos a cargos menores, si el fiscal del distrito está de acuerdo
- Acortar la libertad condicional a los presos sin prontuario criminal o la libertad preparatoria a condenados que tienen buena conducta.
- Dejar la sentencia original.

PRESENTACIÓN DE LA PETICIÓN

Una petición es un documento que se envía a la corte pidiendo algo. Se adjunta una petición de muestra que usted puede usar para presentar a la corte. El formulario le permite solicitar un abogado para que lo represente. Usted no está obligado a usar este formulario.

Si desea utilizar el formulario, deberá marcar las casillas y escribir información sobre su caso. Una vez que haya completado y firmado el formulario, debe:

- (1) envíe el formulario original completo a la corte que lo sentenció.
- (2) envíe una copia al fiscal de distrito.
- (3) envíe una copia al abogado o al defensor público que lo representó.
- (4) guarde una copia para sus archivos.

Se adjuntan las direcciones de las oficinas de defensores públicos en todo California. Esto puede ser útil para llenar la petición. Las direcciones deberían estar en los papeles de la corte, si es que todavía los tiene. Si no tiene las direcciones que necesita, debe consultar con la biblioteca legal.

PREGUNTAS FRECUENTES

El siguiente no es un consejo legal específico para su caso. Es su responsabilidad realizar la investigación legal o comunicarse con un abogado para determinar si califica para solicitar este beneficio legal.

P: Soy elegible para recibir este beneficio. ¿Cómo puede ayudarme esta ley?

R: El juez puede acortar la duración de su detención o acortar la duración de su libertad condicional. También, si todos están de acuerdo, el juez puede cambiar el tipo de cargo. Para cambiar el tipo de cargo por el que se le condena, deben estar todos de acuerdo el fiscal, el juez y usted. Si todos están de acuerdo, no importa si no se le acusó originalmente de delitos menores incluidos o relacionados.

P: ¿Necesito estar cumpliendo una sentencia en prisión para usar esta ley?

R: No. No importa dónde esté cumpliendo su sentencia. La nueva ley se aplica a aquellos que cumplen sentencias en cárceles del condado o en CDCR. También se aplica a aquellos que están en supervisión debido a su condena (por ejemplo, aquellos en libertad condicional, libertad preparatoria, post-liberación supervisión comunitaria o supervisión obligatoria).

P: Acepté un trato. ¿Soy elegible si no fui a juicio?

R: Sí. No importa si fue condenado después de un juicio o si fue condenado a través de un acuerdo de culpabilidad. Si el juez determina que usted es elegible para la reparación, la nueva ley es aplicable.

P: ¿Esta ley también se aplica a las condenas por delitos menores?

R: No. La nueva ley se limita a aquellos que actualmente cumplen condenas por delitos graves.

P: ¿Cuándo debo presentar la petición de revocación de sentencia?

R: La nueva ley entra en vigencia el 1 de enero de 2023. Debe presentar su petición para revocar la sentencia después de esa fecha.

P: ¿Hay una fecha límite para presentar una petición?

R: No. No hay fecha límite para presentar una petición de revocatoria de sentencia.

P: ¿Debo presentar una petición si no sé si soy elegible?

R: No debe presentar una petición a menos que usted crea que es elegible. Sin embargo, si usted después de leer la petición piensa que es elegible, puede presentar la petición y pedir un abogado. Usted no tiene que adjuntar registros militares o de salud mental si presenta la petición de revocatoria de sentencia. Su abogado puede obtener esos registros más tarde.

P: ¿Qué condenas anteriores podrían impedirme usar esta nueva ley?

R: Si usted tiene una condena por uno de estos delitos enumerados abajo, no puede usar la nueva ley. No importa si la condena es antigua o si es reciente.

- Cualquier delito de violencia sexual
- Cópula oral, sodomía o penetración sexual a una persona menor de 14 años o más de 10 años más joven que la otra persona
- Cualquier acto lascivo o lujurioso que involucre a una persona menor de 14 años
- Cualquier condena que requiere ser registrado como delincuente sexual
- Cualquier delito de homicidio, incluido el intento de homicidio
- Instigación para cometer homicidio
- Agresión con ametralladora a un oficial de paz o bombero
- Posesión de un arma de destrucción masiva
- Cualquier delito grave o violento punible con cadena perpetua o muerte

P: ¿Cómo puedo obtener registros de mi servicio militar?

R: Puede solicitar registros de su servicio militar al National Personnel Records (NPRC) utilizando el formulario SF 180. Se incluye una copia de este formulario con este formulario. Usted también puede escribir una carta al NPRC y enviarla a:

NPRC
1 Archives Drive
St. Louis, Missouri 63138.

SAMPLE PETITION

| | |
|---|--|
| Petitioner name: CDCR no. (if applicable): Institution name (if applicable): Street address: City, State, Zip Code: Attorney name (if applicable): State Bar no.: | <i>For Court Use Only</i> |
| SUPERIOR COURT OF CALIFORNIA, COUNTY OF: _____ | SUPERIOR COURT CASE NUMBER: |
| PEOPLE OF THE STATE OF CALIFORNIA v. DEFENDANT: _____ DATE OF BIRTH: _____ | <i>For Court Use Only</i> |
| PETITION FOR RECALL OF SENTENCE (Pen. Code § 1170.91(b)) | Date: Time: Department: |

I _____, declare as follows:

1. I am currently serving a sentence for the felony conviction(s) listed below.
- I am currently in jail or prison; or
- I am currently on supervision because of my conviction (for example, probation, parole, post-release community supervision, or mandatory supervision).
2. On (date of conviction): _____, I was convicted of the following felony offense(s) (attach additional sheets if necessary):

| Code | Section | Name of offense |
|------|---------|-----------------|
| | | |
| | | |
| | | |
| | | |
| | | |

3. I am now or was a member of the United States military. I am serving or served in the (branch of military) _____.
4. I request that this Court appoint counsel to represent me.
5. I am suffering from at least one of the conditions listed below that are related to my service in the military:
- Sexual trauma
 - Traumatic Brain Injury (TBI)
 - Post-Traumatic Stress Disorder (PTSD)
 - Substance Abuse
 - Mental health problem
6. I believe that when I was sentenced, the judge did not consider my service-connected trauma, injury or condition as a factor in deciding my sentence.
7. I have mailed a copy of this Petition to the following:

Office of the District Attorney

County of _____

[Street Address]

[City, State, Zip]

Office of the Public Defender

County of _____

[Street Address]

[City, State, Zip]

OR

[If not represented by the Public Defender]

[Trial attorney name]

[Street Address]

[City, State, Zip]

I declare under penalty of perjury that the above is true except as to that stated on information and belief or that which is legal conclusion and as to those, I believe them to be true.

Date: _____ **City:** _____ **State:** _____

Signature: _____ **Printed name:** _____

REQUEST FOR MILITARY RECORD

INSTRUCTION AND INFORMATION SHEET FOR SF 180, REQUEST PERTAINING TO MILITARY RECORDS

1. General Information. The Standard Form 180, Request Pertaining to Military Records (SF 180) is used to request information from military records. Certain identifying information is necessary to determine the location of an individual's record of military service. Please try to answer each item on the SF180. If you do not have and cannot obtain the information for an item, show "NA," meaning the information is "not available". Include as much of the requested information as you can. Incomplete information may delay response time. To determine where to mail this request see Page 2 of the SF 180 for record locations and facility addresses. Medical information may be withheld from a patient if determined that the information would be detrimental to the patient's physical or mental health or would likely cause the patient to harm himself or someone else. Online requests may be submitted to the National Personnel Records Center (NPRC) by a veteran or deceased veteran's next-of-kin using eVetRecs at <https://www.archives.gov/veterans/military-service-records/>.

2. Personnel Records/Military Human Resource Records/Official Military Personnel File (OMPF) and Medical Records/Service Treatment Records (STR). Personnel records of military members who were discharged, retired, or died in service **LESS THAN 62 YEARS AGO** and medical records are in the legal custody of the military service department and are administered in accordance with rules issued by the Department of Defense and the Department of Homeland Security (DHS, Coast Guard). STRs of persons on active duty are generally kept at the local servicing clinic. After the last day of active duty, STRs should be requested from the appropriate address on page 2 of the SF 180 (See item 3, Archival Records, if the military member was discharged, retired or died in service more than 62 years ago).

a. Release of information: Release of information is subject to restrictions imposed by the military services consistent with Department of Defense regulations, the provisions of the Freedom of Information Act (FOIA) and the Privacy Act of 1974. The service member (either past or present) or the member's authorized legal recipient has access to almost any information contained in that member's own record. The authorization signature of the service member or the member's authorized legal recipient is needed in Section III of the SF 180. Others requesting information from military personnel records and/or STRs must have the release authorization in Section III of the SF 180 signed by the member or authorized legal recipient. If the appropriate signature cannot be obtained, only limited types of information can be provided (DoD 6025.18-R C8). If the former member is deceased, the surviving next-of-kin (NOK) may be entitled to greater access to a deceased veteran's records than a member of the general public (DoD 6025.18-R C6.2.1.2). The NOK may be any of the following: unmarried/surviving spouse, father, mother, son, daughter, sister, or brother. Requesters **MUST provide proof of death such as the DD Form 1300, Casualty Report, a copy of a death certificate, newspaper article (obituary) or death notice, coroner's report of death, funeral director's signed statement of death, or verdict of coroner's jury.**

b. Fees for records: There is no charge for most services provided to service members or next-of-kin of deceased veterans. A nominal fee is charged for certain types of service. In most instances, service fees cannot be determined in advance. If your request involves a service fee, you will receive an invoice with your records.

3. Archival Records. Personnel records of military members who were discharged, retired, or died in service **62 OR MORE YEARS AGO** have been transferred to the legal custody of NARA and are referred to as "archival records".

a. Release of Information: Archival records are open to the public. The Privacy Act of 1974 does not apply to archival records, therefore, written authorization from the veteran or next-of-kin is not required. In order to protect the privacy of the veteran, his/her family, and third parties named in the records, the personal privacy exemption of the Freedom of Information Act (5 U.S.C. 552 (b)(6)) may still apply and may preclude the release of some information.

b. Fees for Archival Records: Access to archival records are granted by offering copies of the records for a fee (44 U.S.C. 2116 (c)). If a fee applies to the copies of documents in the requested record, you will receive an invoice. Copies will be sent after payment is made. For more information see <https://www.archives.gov/st-louis/archival-programs/military-personnel-archival/ompf-archival-requests.html>.

4. Where reply may be sent. The reply may be sent to the service member or any other address designated by the service member or other authorized requester. If the designated address is NOT registered to the addressee by the U.S. Postal Service (USPS), provide BOTH the addressee's name AND "in care of" (c/o) the name of the person to whom the address is registered on the NAME line in Section III, item 3, on page 1 of the SF 180. The COMPLETE address must be provided, INCLUDING any apartment/suite/unit/lot/space/etc. number. NOTE: If requester desires to send his/her record to a third party, he/she must fill out a DD Form 2870 authorizing the releasing agency to release the record and the timeframe of the authorization. The form may be downloaded using most commercial web search tools by entering "DD Form 2870" as a search term.

5. Definitions and abbreviations. DISCHARGED -- the individual has no current military status; SERVICE TREATMENT RECORD (STR) -- The chronology of medical, mental health, and dental care received by service members during the course of their military career (does not include records of treatment while hospitalized); TDRL -- Temporary Disability Retired List.

6. Service completed before World War I. National Archives Trust Fund (NATF) forms must be used to request these records. Obtain the forms by e-mail from inquire@nara.gov or write to the Code 6 address on page 2 of the SF 180.

PRIVACY ACT OF 1974 COMPLIANCE INFORMATION

The following information is provided in accordance with 5 U.S.C. 552a(e)(3) and applies to this form. Authority for collection of the information is 44 U.S.C. 2907, 3101, and 3103, and Public Law 104-134 (April 26, 1996), as amended in title 31, section 7701. Disclosure of the information is voluntary. If the requested information is not provided, it may delay servicing your inquiry because the facility servicing the service member's record may not have all of the information needed to locate it. The purpose of the information on this form is to assist the facility servicing the records (see the address list) in locating the correct military service record(s) or information to answer your inquiry. This form is then retained as a record of disclosure. The form may also be disclosed to Department of Defense components, the Department of Veterans Affairs, the Department of Homeland Security (DHS, U.S. Coast Guard), or the National Archives and Records Administration when the original custodian of the military health and personnel records transfers all or part of those records to that agency. If the service member was a member of the National Guard, the form may also be disclosed to the Adjutant General of the appropriate state, District of Columbia, or Puerto Rico, where he or she served.

PAPERWORK REDUCTION ACT PUBLIC BURDEN STATEMENT

Public burden reporting for this collection of information is estimated to be five minutes per request, including time for reviewing instructions and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of the collection of information, including suggestions for reducing this burden, to National Archives and Records Administration (MP), 8601 Adelphi Road, College Park, MD 20740-6001. **DO NOT SEND COMPLETED FORMS TO THIS ADDRESS. SEND COMPLETED FORMS TO THE APPROPRIATE ADDRESS LISTED ON PAGE 2 OF THE SF 180.**

REQUEST PERTAINING TO MILITARY RECORDS

Requests can be submitted online using eVetRecs at <https://www.archives.gov/veterans/military-service-records/>

To ensure the best possible service, please thoroughly review the accompanying instructions before filling out this form. PLEASE PRINT LEGIBLY OR TYPE BELOW.

SECTION I - INFORMATION NEEDED TO LOCATE RECORDS (Furnish as much information as possible.)

| | | | |
|--|----------------------|------------------|-------------------|
| 1. NAME USED DURING SERVICE (last, first, full middle) | 2. SOCIAL SECURITY # | 3. DATE OF BIRTH | 4. PLACE OF BIRTH |
|--|----------------------|------------------|-------------------|

5. SERVICE, PAST AND PRESENT (For an effective records search, it is important that ALL service be shown below.)

| | BRANCH OF SERVICE | DATE ENTERED | DATE RELEASED | OFFICER | ENLISTED | SERVICE NUMBER (If unknown, write "unknown") |
|-------------------|-------------------|--------------|---------------|--------------------------|--------------------------|---|
| a. ACTIVE | | | | <input type="checkbox"/> | <input type="checkbox"/> | |
| b. RESERVE | | | | <input type="checkbox"/> | <input type="checkbox"/> | |
| c. NATIONAL GUARD | | | | <input type="checkbox"/> | <input type="checkbox"/> | |

6. PLEASE LIST LAST FOUR DUTY STATIONS, IF KNOWN: 1. _____ 2. _____ 3. _____ 4. _____

7. IS THIS PERSON DECEASED? NO YES - MUST provide Date of Death if veteran is deceased: _____

8. DID THIS PERSON RETIRE FROM MILITARY SERVICE? NO YES

SECTION II - INFORMATION AND/OR DOCUMENTS REQUESTED

1. CHECK THE ITEM(S) YOU ARE REQUESTING:

- DD Form 214 or equivalent:** Year(s) in which form(s) issued to veteran (Date of Separation): _____
This form contains information used to verify military service. An UNDELETED DD Form 214 is ordinarily required to determine eligibility for benefits. If you request a DELETED copy, the following items will be blacked out: authority for separation, reason for separation, reenlistment eligibility code, separation (SPD/SPN) code, and, for separations after June 30, 1979, character of separation and dates of time lost. Please note – recent veterans may be able to request a DD Form 214 through milConnect by visiting: <https://www.va.gov/records/get-military-service-records/>
An UNDELETED copy will be sent UNLESS YOU SPECIFY A DELETED COPY by checking this box: I want a DELETED copy.
- Official Military Personnel File (OMPF):** The OMPF may include duty stations and assignments, training and qualifications, awards and decorations received, disciplinary actions, administrative remarks, enlistment and/or discharge information (including DD Form 214, Report of Separation, or equivalent), and other personnel actions. Detailed information about the veteran's participation in battles and their military engagements is NOT contained in the record.
- Medical Records:** Includes health (outpatient), extended ambulatory, and dental records. If inpatient/hospitalization records are requested, please specify below.
 I request inpatient/hospitalization records from _____ (facility), last treated in _____ (year). (NOTE: Fields are required)
If available, you may receive copies of inpatient narrative summaries, operative reports, discharge summaries, etc. contained in the record.
- Dental Records:** Please check this box if ONLY dental records are needed from the medical record.
- Other (Please Specify):** _____

2. PURPOSE: (Providing information about the purpose of the request is voluntary; however, it may help to provide the best possible response and may result in a faster reply. Information provided will in no way be used to make a decision to deny the request.)

- Benefits (explain) Employment VA Loan Programs Medical Genealogy Correction Personal Other (explain)

Explain here: _____

SECTION III - RETURN ADDRESS AND SIGNATURE

1. REQUESTER NAME: _____ 2. RELATIONSHIP TO VETERAN: _____

3. I am the MILITARY SERVICE MEMBER OR VETERAN identified in Section I, above. I am the VETERAN'S LEGAL GUARDIAN (MUST submit copy of Court Appointment) or AUTHORIZED REPRESENTATIVE (MUST submit copy of Authorization Letter or Power of Attorney)
- I am the DECEASED VETERAN'S NEXT-OF-KIN (MUST submit Proof of Death. See item 2a on instruction sheet.) OTHER (Specify): _____

4. SEND INFORMATION/DOCUMENTS TO: (Please print or type. See item 4 on accompanying instructions.)

Name _____

Street Address _____ Apt. # _____

City _____ State _____ ZIP Code _____

Daytime Phone _____ Fax Number _____

Email Address _____

5. AUTHORIZATION SIGNATURE: I declare (or certify, verify, or state) under penalty of perjury under the laws of the United States of America that the information in this Section 3 is true and correct and that I authorize the release of the requested information. (See items 2a or 3a on the accompanying instructions sheet. Without the Authorization Signature of the veteran, next-of-kin of deceased veteran, veteran's legal guardian, authorized government agent, or other authorized representative, only limited information can be released unless the request is archival. No signature is required if the request is for archival records.)

Signature Required – Do not print _____ Date _____

* This form is available at <https://www.archives.gov/veterans-military-service-records/standard-form-180.pdf> on the National Archives and Records Administration (NARA) web site. *

The various categories of military service records are described in the chart below. For each category there is a code number which indicates the address at the bottom of the page to which this request should be sent. Please refer to the Instruction and Information Sheet accompanying this form as needed.

| BRANCH | CURRENT STATUS OF SERVICE MEMBER | Personnel Record | Medical or Service Treatment Record |
|--|--|------------------|-------------------------------------|
| | | | |
| AIR FORCE | Discharged, deceased, or retired before 5/1/1994 | 14 | 14 |
| | Discharged, deceased, or retired 5/1/1994 – 9/30/2004 | 14 | 11 |
| | Discharged, deceased, or retired 10/1/2004 – 12/31/2013 | 1 | 11 |
| | Discharged, deceased, or retired on or after 1/1/2014 | 1 | 13 |
| | Active (including National Guard on active duty in the Air Force), TDRL, or general officers retired with pay | 1 | |
| | Reserve, IRR, Retired Reserve in non-pay status, current National Guard officers not on active duty in the Air Force, or National Guard released from active duty in the Air Force | 2 | |
| | Current National Guard enlisted not on active duty in the Air Force | 2 | 13 |
| COAST GUARD | Discharged, deceased, or retired before 1/1/1898 | 6 | |
| | Discharged, deceased, or retired 1/1/1898 – 3/31/1998 | 14 | 14 |
| | Discharged, deceased, or retired 4/1/1998 – 9/30/2006 | 14 | 11 |
| | Discharged, deceased, or retired 10/1/2006 – 9/30/2013 | 3 | 11 |
| | Discharged, deceased, or retired on or after 10/1/2013 | 3 | 14 |
| | Active, Reserve, Individual Ready Reserve or TDRL | 3 | |
| MARINE CORPS | Discharged, deceased, or retired before 1/1/1895 | 6 | |
| | Discharged, deceased, or retired 1/1/1905 – 4/30/1994 | 14 | 14 |
| | Discharged, deceased, or retired 5/1/1994 – 12/31/1998 | 14 | 11 |
| | Discharged, deceased, or retired 1/1/1999 - 12/31/2013 | 4 | 11 |
| | Discharged, deceased, or retired on or after 1/1/2014 | 4 | 8 |
| | Individual Ready Reserve | 5 | |
| Active, Selected Marine Corps Reserve, TDRL | 4 | | |
| ARMY | Discharged, deceased, or retired before 11/1/1912 (enlisted) or before 7/1/1917 (officer) | 6 | |
| | Discharged, deceased, or retired 11/1/1912 – 10/15/1992 (enlisted) or 7/1/1917 – 10/15/1992 (officer) | 14 | |
| | Discharged, deceased, or retired 10/16/1992 – 9/30/2002 | 14 | 11 |
| | Discharged, deceased, or retired (including TDRL) 10/1/2002 – 12/31/2013 | 7 | 11 |
| | Discharged, deceased, or retired (including TDRL) on or after 1/1/2014 | 7 | 9 |
| Current Soldier (Active, Reserve (including Individual Ready Reserve) or National Guard) | 7 | | |
| NAVY | Discharged, deceased, or retired before 1/1/1886 (enlisted) or before 1/1/1903 (officer) | 6 | |
| | Discharged, deceased, or retired 1/1/1886 – 1/30/1994 (enlisted) or 1/1/1903 – 1/30/1994 (officer) | 14 | 14 |
| | Discharged, deceased, or retired 1/31/1994 – 12/31/1994 | 14 | 11 |
| | Discharged, deceased, or retired 1/1/1995 – 12/31/2013 | 10 | 11 |
| | Discharged, deceased, or retired on or after 1/1/2014 | 10 | 8 |
| Active, Reserve, or TDRL | 10 | | |
| PHS | Public Health Service - Commissioned Corps officers only | 12 | |

ADDRESS LIST OF CUSTODIANS and SELF-SERVICE WEBSITES (BY CODE NUMBERS SHOWN ABOVE) – Where to write/send this form

| | | | | | |
|----------|--|-----------|---|-----------|--|
| 1 | Air Force Personnel Center AFPC/DP2SSM 550 C Street West JBSA-Randolph TX 78150-4721 Fax Number: 210-565-3124 Email: DP2SSM.MILRECS.INCOMING@US.AF.MIL | 6 | National Archives & Records Administration Research Services (RDTIR) 700 Pennsylvania Avenue NW Washington, DC 20408-0001 | 11 | Department of Veterans Affairs ATTN: Release of Information Claims Intake Center P.O. Box 4444 Janesville, WI 53547-4444 Fax Number: 844-531-7818 https://www.va.gov |
| 2 | Air Reserve Personnel Center Total Force Service Center: 1-800-525-0102 https://mypers.af.mil/ | 7 | US Army Human Resources Command's web page: https://www.hrc.army.mil/content/1113 or 1-888-ARMYHRC (1-888-276-9472) | 12 | Division of Commissioned Corps Officer Support ATTN: Records Officer 1101 Wooton Parkway, Plaza Level, Suite 100 Rockville, MD 20852 |
| 3 | Commander, Personnel Service Center (BOPS-C-MR) MS7200 US Coast Guard 2703 Martin Luther King Jr Ave SE Washington, DC 20593-7200 https://www.dcms.uscg.mil/ompf | 8 | Navy Medicine Records Activity (NMRA) BUMED Detachment St. Louis 4300 Goodfellow Boulevard, Building 103 St. Louis, MO 63120 Fax number: 314-260-8128 | 13 | AF STR Processing Center ATTN: Release of Information 3370 Nacogdoches Road, Suite 116 San Antonio, TX 78217 |
| 4 | Headquarters U.S. Marine Corps Manpower Management Records & Performance (MMRP-10) 2008 Elliot Road Quantico, VA 22134-5030 SMB.MANPOWER.MMRP-10@usmc.mil | 9 | AMEDD Army Record Processing Center 3370 Nacogdoches Road, Suite 116 San Antonio, TX 78217 Fax Number: 210-201-8310 | 14 | National Personnel Records Center (Military Personnel Records) 1 Archives Drive St. Louis, MO 63138-1002 https://www.archives.gov/veterans/military-service-records/ |
| 5 | Marine Corps Forces Reserve 2000 Opelousas Avenue New Orleans, LA 70114 | 10 | Navy Personnel Command (PERS-313) 5720 Integrity Drive Millington, TN 38055-3130 | | |