## DEPARTMENT OF THE ARMY NORTHWESTERN JOINT REGIONAL CORRECTIONAL FACILITY JOINT BASE LEWIS-MCCHORD, WA 98433

## FAX COVER SHEET

## **COUNSELING SECTION**

SFC DANIEL, Senior Counselor SSG ROMESBURG, Counselor SSG FOUTCH, Counselor/Education SSG HOUGH, Counselor

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TO: Mr. Kenneth
FROM: SGT Starks
ATTN: DA Form 2569-R
FAX#: 202-318-7657
REMARKS: Please fill out and
return ASAP

TOTAL NUMBER OF PAGES INCLUDING COVER

(Civitian and Individual Military Counsel) For use of this form, see AR 190-47; the proponent agency is DCS, G-1.	
	DATE
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Register Number, have retnined	
an attorney whose address is	
o represent me in the matter of	
o represent me in the matter of	
request that said attorney be permitted to visit me and to commi	thionte with me as necessary in regard to this matter.
	(Signature)
	DATE
an attorney in good standing and a member of the Bar of	
	have been retained and am represe-
	, a prisoner confin
the matter of	
the matter of	
	(Signature)
	DATE
APPROVE	ED:
	(Commandant/Confinement Officer)
OTE: Individual military counsel is a nonapproprinted military co- pollate, will not be required to complete this form.	unsel. Appointed military defense counsel, either trial or