



NAME OF ENLISTEE/REENLISTEE (Last, First, Middle)

THOMPSON ZACKARY BLAKE

SOCIAL SECURITY NO OF ENLISTEE/REENLISTEE

417-35-3084

F. DISCHARGE FROM DELAYED ENTRY/ENLISTMENT PROGRAM

20a. I request to be discharged from the Delayed Entry/Enlistment Program (DEP) and enlisted in the Regular Component of the United States (list branch of service) MARINE CORPS for a period of 4 years and 0 weeks. No changes have been made to my enlistment options OR if changes were made they are recorded on Annex(es) C

which replace(s) Annex(es) B

b. SIGNATURE OF DELAYED ENTRY/ENLISTMENT PROGRAM ENLISTEE

Zack Thompson

c. DATE SIGNED (YYYYMMDD)

20080512

G. APPROVAL AND ACCEPTANCE BY SERVICE REPRESENTATIVE

21. SERVICE REPRESENTATIVE CERTIFICATION

a. This enlistee is discharged from the Reserve Component shown in item 8 and is accepted for enlistment in the Regular Component of the United States (list branch of service) MARINE CORPS in pay grade E-1

b. NAME (Last, First, Middle)

WILSON MICAH T

c. PAY GRADE

E-7

d. UNIT/COMMAND NAME

USMC RECRUITING DIST

e. SIGNATURE

[Signature]

f. DATE SIGNED (YYYYMMDD)

20080512

g. UNIT/COMMAND ADDRESS (City, State, ZIP Code)

NASHVILLE
TN 37214

H. CONFIRMATION OF ENLISTMENT OR REENLISTMENT

22a. IN A REGULAR COMPONENT OF THE ARMED FORCES:

I, ZACKARY BLAKE THOMPSON, do solemnly swear (or affirm) that I will support and defend the Constitution of the United States against all enemies, foreign and domestic; that I will bear true faith and allegiance to the same; and that I will obey the orders of the President of the United States and the orders of the officers appointed over me, according to regulations and the Uniform Code of Military Justice. So help me God.

b. SIGNATURE OF ENLISTEE/REENLISTEE

Zack Thompson

c. DATE SIGNED (YYYYMMDD)

20080512

23. ENLISTMENT OFFICER CERTIFICATION

a. The above oath was administered, subscribed, and duly sworn to (or affirmed) before me this date.

b. NAME (Last, First, Middle)

MOORE, JOEL C

c. PAY GRADE

O-2

d. UNIT/COMMAND NAME

NASHVILLE MEPS

e. SIGNATURE

[Signature]

f. DATE SIGNED (YYYYMMDD)

20080512

g. UNIT/COMMAND ADDRESS (City, State, ZIP Code)

NASHVILLE
TN 37214-2471

(Initials of Enlistee/Reenlistee) ZBT



CHRONOLOGICAL RECORD

UNIT/ORGANIZATION	PRIMARY DUTY	REMARKS
2d RTBN, RTR MCRD Parris Island RUC 32092, MCC 016	Recruit (8000) (03)	20080512 JD for RCT TRNG 20080802 TR to CG MCG CAMLEJ for DU MCC JA4
SOI TRNGCMD CAMLEJ MCC JA4 RUC 31407	STUD^F MCT (9900) (01)	2008020 ID FOR TEMINS W/SAC 02-020 TR TO CG Cdr MCTB for TEMINS (1#35) 08 20080116 TR TO CG Cdr Jambler, NC MCC K78 FOR DU
MCCSSS TRNG CMD CAMLEJ NC RUC 31318 MCC K78	STUDENT () (4) 3521	2008040917 JD FOR TEMINS
CLR-3 3D MLG FMFPAC UNIT 38416 FPO AP 96604 RUC 29040 MCC 1CH	ORG AUTMV MECH (3521) ()	20090308 JD FOR DU
Thompson, Zackary B.		417353084
NAME (last, first, middle)		SSN

NAVMC 118(3) (REV. 5-74)(EF)
 SN:0109-LF-062-6700
 (Previous editions are obsolete)

(3)

G

ADMINISTRATIVE REMARKS (1070)

DATE 20080512	DATE	
Articles UCMJ explain to me this date as required by Article 137, UCMJ.	Articles UCMJ explain to me this date as required by Article 137, UCMJ.	

(Signature) <i>Zackary B. Thompson</i>	(Signature)

Thompson, Zackary B. 417353084
Name (last, first, middle) SSN

RECEIVED
 20091128

Distribution:
 Original copy to SRB/OQR
 Copy to: OMPF, UNIT FILES
 MEMBER

← Staple Additional pages here.

1. OFFENSES (To include specific circumstances and the date and place of commission of the offense.)
 Viol Art 92. Failure to obey order or regulation. On or about 2200, of 16 Oct 09, at Barracks 5704, CLR-3, 3d MLG, Camp Foster, Okinawa, Japan, SNM violated MCBJO 5355.1 by smoking the prohibited substance "spice".

2. I have been advised of and understand my rights under Article 31, UCMJ. I also have been advised of and understand my right to demand trial by court-martial in lieu of non-judicial punishment. I do (do not) demand trial and (will) not (will not) accept non-judicial punishment subject to my right of appeal. I further certify that I (have) not (have not) been given the opportunity to consult with a military lawyer, provided at no expense to me, prior to my decision to accept non-judicial punishment.

(DATE) 091028

(Signature of accused) *Zackary Thompson*

3. The accused has been afforded these rights under Article 31, UCMJ, and the right to demand trial by court-martial in lieu of non-judicial punishment.

(DATE) 091028

(Signature of immediate CO of accused) *J. L. Hatton*

4. BOOKER STATEMENT: I have been given the opportunity to consult with a lawyer, provided by the Government at no cost to me, in regard to a pending NJP for violation of Article(s) 92 of the UCMJ. I understand I have the right to refuse that NJP; I do (do not) choose to exercise that right. I further understand that acceptance of NJP does not preclude my command from taking other adverse administrative action against me.

(DATE) 091028

(Signature) *Zackary Thompson*

5. UNAUTHORIZED ABSENCES (in excess of 24 hours) AND MARKS OF DESERTION

NONE. 091118

6. FINAL DISPOSITION TAKEN AND DATE Red to the grade of E-2/PFC. For of \$784.00 for 2 mos. Total for of \$1568.00. Restr to the place of mess, bil, du, worship and most dir route to and fr w/o susp fr du for 45 das. EPD for 45 das. 091118

7. SUSPENSION OF EXECUTION OF PUNISHMENT, IF ANY. Susp of for of \$784.00 for 2 mos, total for of \$1568.00, for 6 mos at which time unless sooner vacated the susp will be remitted w/o further action. 091118

8. FINAL DISPOSITION TAKEN BY (Name, grade, title)

J. L. HATTON, Col, CO

9. Upon consideration of the facts and circumstances surrounding (this offense) (these offenses) and upon further consideration of the needs of military discipline in this command, I have determined the offense (s) involved herein to be minor and properly punishable under Article 15, UCMJ, such punishment to be as indicated.

(Signature of CO who took final disposition in 6) *J. L. Hatton*

10. DATE OF NOTICE TO ACCUSED OF FINAL DISPOSITION TAKEN.

091118

11. The accused has been advised of the right of appeal.

091118
 (DATE)

(Signature of CO who took final action in 9) *J. L. Hatton*

12. Having been advised of and understanding my right of appeal, at this time I do (do not intend) to file an appeal.

091118
 (DATE)

Zackary Thompson
 (Signature of accused)

13. DATE OF APPEAL, IF ANY.

NONE

14. DECISION ON APPEAL (IF APPEAL IS MADE), DATE THEREOF, AND SIGNATURE OF CO WHO MADE DECISION.

(DATE)

(Signature of CO making decision on appeal)

15. DATE OF NOTICE TO ACCUSED OF DECISION ON APPEAL.

16. REMARKS

Reduced to WEB belt.
 RED. PFCs 4.3 CON 2.5

17. Final administrative action, as appropriate, has been completed.

UD# 71091 DTD 2009 11 24 UNIT 701

18. UNIT

GSMT, CLR-3, 3d MLG, OKINAWA, JAPAN

19. INDIVIDUAL (Last name, first name, middle initial)

THOMPSON, ZACKARY, B.

20. GRADE

LCpl/E-3

21. SSN

417-35-3084

SSN: 0417353084 NAME: THOMPSON, ZACKARY B
RUC: COMPANY CODE: PRES-GRADE: E2 RECSTAT: A COMP CODE: 11
PLT CODE: TRNGRP: R-RECSTAT: RCOMP-CODE:

SPOUSE NAME/ADDRESS
~~NONE~~ Single *Zack Thompson 20090309*

CHILD NR/NAME/DOB/ADDRESS
NONE

GUARDIAN NR/NAME/PHONE/RELATION/ADDRESS
NONE

FATHER/MOTHER NAME/ADDRESS
WALTER M THOMPSON 3200 STONEWALL RD
PAMELA L THOMPSON HUNTSVILLE AL 35763
SAME AS FATHER

DEATH GRATUITY BENEFICIARY(IES) NR/NAME/RELATION/PCT/ADDRESS
1 WALTER M THOMPSON (F) (SEE ABOVE OR ADDRESS NOT GIVEN)
DEATH GRATUITY 2 NOT GIVEN *Zack Thompson 20090309*

PAY ARREARS BENEFICIARY(IES) NR/NAME/RELATION/PCT/ADDRESS
1 WALTER M THOMPSON (F) (SEE ABOVE OR ADDRESS NOT GIVEN)
PAY ARREARS 2 NOT GIVEN *Zack Thompson 20090309*

DO NOT NOTIFY DUE TO ILL HEALTH NR/NAME/RELATION/ADDRESS
NOT NOTIFY 1 NOT GIVEN
NOT NOTIFY 2 NOT GIVEN

INSURANCE COMPANIES NR/NAME/POLICY NUMBER
1 NONE *Zack Thompson 20090309*

NEXT OF KIN NR/TELEPHONE NUMBER/RELATIONSHIP
1 2564791990 *Zack Thompson 20090309*

PRIMARY NEXT OF KIN DIRECTIONS
NONE

MIA NOTIFY NAME/TELEPHONE1/TELEPHONE2/RELATIONSHIP
SEE NOK INFORMATION

MIA ADDRESS/DIRECTIONS
SEE NOK INFORMATION

ADDL DEATH GRATUITY BENEFICIARY NR/RELATIONSHIP/PCT
NONE

MEMBER CERTIFICATION *Zack Thompson* REPORT ON UD NUMBER *401091*

WITNESS CERTIFICATION *[Signature]* DATE CERTIFIED *20090309*

LCA/OSMC

SSN: 0417353084 NAME: THOMPSON, ZACKARY B
 RUC: COMPANY CODE: PRES-GRADE: E2 RECSTAT: A COMP CODE: 11
 PLT CODE: TRNGRP: R-RECSTAT: RCOMP-CODE:

SGLI MEMBER ELECTION ELECTS \$400,000 COVERAGE
 SGLI MEMBER BENEFICIARY FATHER TO RECEIVE
 SGLI MEMBER PAY DESIGNATION LUMP SUM
 SGLI MEMBER VA CERTIFY DATE ~~20080513~~ 20090309 Zack Thompson 20090309
 SGLI SPOUSE ELECTION NO SPOUSE

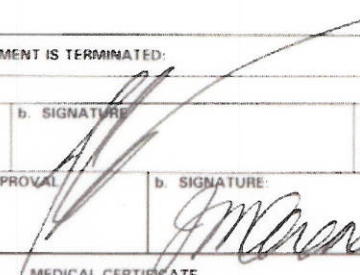

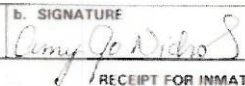

PERSON AUTHORIZED DIRECT DISPOSITION NAME/ADDRESS/TELEPHONE/RELATIONSHIP
 NAME/RELATIONSHIP WALTER M THOMPSON (F)
 ADDR1 3200 STONEWALL RD
 ADDR2 HUNTSVILLE AL 35763
 TELE 2565391991 Zack Thompson 20090309

MEMBER CERTIFICATION Zack Thompson REPORT ON UD NUMBER AD001

WITNESS CERTIFICATION [Signature] DATE CERTIFIED 20090309

CDL/USMP

CONFINEMENT ORDER

1 PERSON TO BE CONFINED		2. DATE (YYYYMMDD)	
a. NAME (Last, First, Middle) Thompson, Zackary B.		b. SSN 417-35-3084	
c. BRANCH OF SERVICE USMC		d. GRADE E-2	e. MILITARY ORGANIZATION (From) Combat Logistics Regiment 3
TYPE OF CONFINEMENT			
a. PRE TRIAL <input type="checkbox"/> NO <input checked="" type="checkbox"/> YES		b. RESULT OF NJP <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES	
c. RESULT OF COURT MARTIAL: <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES			
TYPE: <input type="checkbox"/> SCM <input type="checkbox"/> SPCM <input type="checkbox"/> GCM <input type="checkbox"/> VACATED SUSPENSION			
4. OFFENSES/CHARGES OF UCMJ ARTICLES VIOLATED: Art 85 - Desertion. On or about 08 Jan 2010 SNM went and remained absent from his unit for a period of approximately 49 days.			
5. SENTENCE ADJUDGED:			b. ADJUDGED DATE (YYYYMMDD)
6. IF THE SENTENCE IS DEFERRED, THE DATE DEFERMENT IS TERMINATED:			
7 PERSON DIRECTING CONFINEMENT			
a. TYPED NAME, GRADE AND TITLE: Jay L. Hatton, O-6, Commanding Officer		b. SIGNATURE 	c. DATE (YYYYMMDD) 2010 02 25
8. a. NAME, GRADE, TITLE OF LEGAL REVIEW AND APPROVAL: Jayme M. Arenas, O-3, Legal Officer		b. SIGNATURE: 	c. DATE (YYYYMMDD) 2010 02 25
MEDICAL CERTIFICATE			
9a. The above named inmate was examined by me at <u>0100</u> on <u>20100226</u> and found to be <input checked="" type="checkbox"/> Fit <input type="checkbox"/> Unfit for confinement. I certify that from this examination the execution of the foregoing sentence to confinement <input checked="" type="checkbox"/> will <input type="checkbox"/> will not produce serious injury to the inmate's health.			
b. The following irregularities were noted during the examination (if none, so state):			
c. HIV Test administered on (YYYYMMDD): <u>20091123</u>			
d. Pregnancy test administered on (YYYYMMDD): <input checked="" type="checkbox"/> N/A			
10. EXAMINER			
a. TYPED NAME, GRADE AND TITLE: NICHOLS Amy LT JLC USN		b. SIGNATURE 	c. DATE (YYYYMMDD) 20100226
		d. TIME 0100	
RECEIPT FOR INMATE			
11. a. THE INMATE NAMED ABOVE HAS BEEN RECEIVED FOR CONFINEMENT AT: <u>CAMP HANSEN BASE BRNO</u> (Facility Name and Location)			
ON <u>20100226</u> AND TIME: <u>0103</u> (YYYYMMDD) (Time)			
b. PERSON RECEIVING FOR INMATE TYPED NAME, GRADE AND TITLE: Kecovich, J.A. SSgt/DRS		c. SIGNATURE: 	d. DATE (YYYYMMDD) 20100226
		e. TIME 0103	