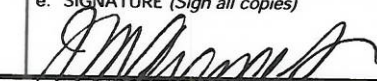


REPORT OF RETURN OF ABSENTEE			REPORT CONTROL SYMBOL	
<p align="center"><b>IMPORTANT NOTICE</b></p> <p>The absentee status of the individual named below has been terminated. Military records indicate that your agency was specifically furnished a copy of DD Form 553, "Deserter/ Absentee Wanted by the Armed Forces," soliciting your support. Request you clear your records of the DD Form 553 pertaining to this individual and the associated unauthorized absence indicated on this report. The Department of Defense and the Military Service law enforcement officials concerned gratefully acknowledge your participation and support of military apprehension programs.</p>			<b>1. DISTRIBUTION</b> <i>(Same as DD Form 553 at time of absence)</i> CMC SRB PNOK	
			<b>2. NAME OF ABSENTEE</b> <i>(Last, First, Middle Initial)</i> Thompson, Zackary, B.	
<b>3. SERVICE</b> M	<b>4. SOCIAL SECURITY NO.</b> 417-35-3084	<b>5. GRADE OR RATE</b> Private First Class, E-2		
<b>6. FORMER ABSENTEE STATUS</b>				
<b>a. FORMER STATUS</b> <i>(X one)</i>		<b>b. DATE/HOUR ABSENCE BEGAN</b> <i>(YYYYMMDD)</i>		
<input type="checkbox"/> (1) ESCAPED OR SENTENCED PRISONER	<input type="checkbox"/> (2) ABSENTEE	20091209, 0900		
<input checked="" type="checkbox"/> (3) DESERTER <i>(Administrative)</i>	<input type="checkbox"/> (4) OTHER			
<b>c. ORGANIZATION AND INSTALLATION FROM WHICH ABSENT</b> Combat Logistics Regiment 3, 3D Marine Logistics Group, Unit 38416, FPO AP 96604-8416				
<b>7. CIRCUMSTANCES OF ABSENTEE'S RETURN</b>				
<b>a. MODE OF RETURN</b> <i>(X one)</i>		<b>b. AUTHORITIES TO WHOM ABSENTEE SURRENDERED OR BY WHOM APPREHENDED</b> <i>(X one)</i>		
<input checked="" type="checkbox"/> (1) APPREHENDED	<input type="checkbox"/> (2) SURRENDERED	<input type="checkbox"/> (1) MILITARY	<input type="checkbox"/> (2) CIVIL	<input type="checkbox"/> (3) FBI
		<input checked="" type="checkbox"/> (5) OTHER <i>(Specify)</i> Huntsville Police Department		
<b>c. PLACE OF INITIAL RETURN</b> Huntsville Police Department Alabama			<b>d. DATE/HOUR OF INITIAL RETURN</b> <i>(YYYYMMDD)</i> 20100221, 2115	
<b>e. REQUIRED ACTION</b> <i>(X one)</i>				
<input checked="" type="checkbox"/> (1) RETURN TO MILITARY CONTROL	<input type="checkbox"/> (2) RETAINED BY CIVIL AUTHORITIES	<input type="checkbox"/> (3) CIVIL CHARGES	<input type="checkbox"/> (4) SAFEKEEPING	
<b>f. MILITARY ORGANIZATION AND INSTALLATION OR CIVILIAN LOCATION</b> Combat Logistics Regiment 3, 3D Marine Logistics Group, Unit 38416, FPO AP 96604-8416			<b>g. DATE RETURNED TO MILITARY CONTROL</b> <i>(YYYYMMDD)</i> 20100222	
<b>8. DISPOSITION OF ABSENTEE</b>				
<b>a. ACTION BY MILITARY AUTHORITIES</b> <i>(X one)</i>		<b>b. TO</b> <i>(Name of Command in charge of absentee)</i>		<b>c. COST OF TRANSPORTATION</b> <i>(To be charged to the individual's account)</i>
<input checked="" type="checkbox"/> (1) RETAINED	<input type="checkbox"/> (2) TRANSFERRED	Combat Logistics Regiment 3, 3D Marine Logistics Group Unit 38416 FPO AP 96604-8416		\$
<input type="checkbox"/> (3) TECHNICAL ARREST ORDERS	<input type="checkbox"/> (4) GUARD			
<b>9. REMARKS</b> <i>(Include location of Service, Pay and Health Records)</i> - PFC Thompson's service record book, medical record, and dental record are being held at Combat Logistics Regiment 3, 3D Marine Logistics Group, Unit 38416, FPO AP 96604-8416				
<b>10. AUTHORIZING OFFICIAL</b>				
<b>a. TYPED NAME</b> <i>(Last, First, Middle Initial)</i> Arenas, Jayme, M.		<b>b. GRADE</b> O-3	<b>c. TITLE</b> Adjutant/Legal Officer	
<b>d. ORGANIZATION</b> CLR-3, 3D MLG, Unit 38416 FPO AP 96604-8416		<b>e. SIGNATURE</b> <i>(Sign all copies)</i> 		<b>f. DATE SIGNED</b> <i>(YYYYMMDD)</i> 20100226

<b>DESERTER/ABSENTEE WANTED BY THE ARMED FORCES</b>			<b>1. DATE PREPARED (YYYYMMDD)</b> 20100105		<b>REPORT CONTROL SYMBOL</b> DD-P&R(SA)1454	
<b>2. TO (Local, State or Federal law enforcement authority as indicated by Military Deserter Information Point)</b> See Distribution List			<b>3. FROM (Organization or activity and place from which absent. If unauthorized absence occurs in transit, list old and new unit in Remarks)</b> Commanding Officer Combat Logistics Regiment 3 3D Marine Logistics Group Unit 38416 FPO AP 96604-8416			<b>4. DISTRIBUTION</b> CMC SRB PNOK
<b>5. ABSENTEE IDENTIFICATION</b>						
<b>a. NAME (Last, First, Middle Initial)</b> Thompson, Zackary B.			<b>b. GRADE/RANK/RATE</b> PFC, E-2		<b>c. SEX</b> M	
<b>d. RACE (X one or more)</b>			<b>e. ETHNICITY (X one)</b>			
<input type="checkbox"/> AMERICAN INDIAN/ALASKA NATIVE	<input type="checkbox"/> ASIAN	<input type="checkbox"/> BLACK OR AFRICAN AMERICAN	<input type="checkbox"/> NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER	<input checked="" type="checkbox"/> WHITE	<input type="checkbox"/> HISPANIC OR LATINO	<input checked="" type="checkbox"/> NOT HISPANIC OR LATINO
			<input type="checkbox"/> DECLINE TO RESPOND		<input type="checkbox"/> DECLINE TO RESPOND	
<b>f. PLACE OF BIRTH (City, State, Country)</b> Madison, AL, USA			<b>g. DATE OF BIRTH (YYYYMMDD)</b> 19891229		<b>h. HEIGHT</b> 70"	<b>i. WEIGHT</b> 185
<b>j. EYE COLOR (X one)</b>			<b>k. HAIR COLOR (X one)</b>			
<input type="checkbox"/> BLACK	<input type="checkbox"/> GREEN	<input type="checkbox"/> VIOLET	<input type="checkbox"/> AUBURN	<input checked="" type="checkbox"/> BROWN	<input type="checkbox"/> SILVER	
<input type="checkbox"/> BLUE	<input type="checkbox"/> GRAY		<input type="checkbox"/> BLACK	<input type="checkbox"/> GRAY	<input type="checkbox"/> WHITE	
<input checked="" type="checkbox"/> BROWN	<input type="checkbox"/> HAZEL		<input type="checkbox"/> BLOND	<input type="checkbox"/> RED	<input type="checkbox"/> BALD	
<b>l. DIP CONTROL NUMBER</b>		<b>m. BRANCH OF SERVICE</b> M		<b>n. SOCIAL SECURITY NO.</b> 417-35-3084		<b>o. CITIZENSHIP</b> US
						<b>p. MARITAL STATUS</b> S
<b>q. MILITARY OCCUPATION</b> 3521, Mechanic			<b>r. PERMANENT RESIDENCE ADDRESS (Include ZIP Code)</b> 3200 Stonewall RD Huntsville, AL 3573			
<b>r. CIVILIAN OCCUPATION</b> Unknown						
<b>6. CURRENT ENLISTMENT</b>			<b>7. ENTRY INTO CURRENT PERIOD OF SERVICE</b>			<b>8. ATTACH PHOTOGRAPH (If available)</b>
<b>a. DATE (YYYYMMDD)</b> 20080512	<b>b. PLACE (City and State)</b> Madison, AL		<b>a. DATE (YYYYMMDD)</b> 20080512	<b>b. PLACE (City and State)</b> Same as 6b.		
<b>9. TIME OF ABSENCE</b>			<b>10. ADMINISTRATIVE DATE OF DESERTION (YYYYMMDD)</b> 20100108			
<b>a. DATE (YYYYMMDD)</b> 20091209	<b>b. HOUR</b> 0900					
<b>11. ESCAPED OR SENTENCED PRISONER (X as applicable)</b>			<b>12. DISCHARGE STATUS (X as applicable)</b>			
<input type="checkbox"/> YES	IF "YES," SPECIFY CHARGE		<b>a. DISCHARGED</b>	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	
<input checked="" type="checkbox"/> NO			<b>b. SUSPENDED</b>	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	
<b>13. OPERATOR'S LICENSE</b>			<b>14. VEHICLE LICENSE</b>			
<b>a. NUMBER</b> Unknown	<b>b. STATE</b>	<b>c. EXP. DATE (YYYYMMDD)</b>	<b>a. PLATE NO.</b> Unknown	<b>b. STATE</b>	<b>c. EXP. DATE (YYYYMMDD)</b>	<b>d. TYPE</b>
<b>15. VEHICLE</b>						
<b>a. VEHICLE IDENTIFICATION NUMBER</b> Unknown		<b>b. YEAR</b>	<b>c. MAKE</b>	<b>d. MODEL</b>	<b>e. STYLE</b>	<b>f. COLOR</b>
<b>16. RELATIVES AND/OR PERSONS KNOWN BY ABSENTEE (If more space is needed, continue in Remarks or on a separate page, making reference to this item number.)</b>						
<b>a. NAME (Last, First, Middle Initial)</b>			<b>b. ADDRESS (Include ZIP Code)</b>			
(1) Thompson, Walter M.			3200 Stonewall RD Huntsville, AL 35763			
(2) Thompson, Pamela L.			3200 Stonewall RD Huntsville, AL 35763			
(3)						
(4)						
(5)						

041909

**17. CERTIFICATION (See Notes)**

The undersigned states: That he/she is a commissioned officer of the United States Marine Corps (Military Department), presently assigned as the Commanding Officer, CLR-3, 3D MLG (Unit from which the alleged deserter absented himself or herself), and in the performance of official duties imposed by Department of Defense Directive 1325.2 and MCO P 5800.16A (Regulations of the Service concerned which implement DOD Directive 1325.2, e.g. Army Regulations 190-9 and 630-10), he/she has conducted an investigation into the status of Zackary B. Thompson, Private First Class (Name and rank of alleged deserter), a member of the United States Armed Forces serving on active duty with CLR-3, 3D MLG (Unit and Service from which the alleged deserter absented himself or herself), by questioning his/her unit cohorts; by examining and verifying the field service records of said service member which reflect his/her duty status; by requesting the member's next of kin to urge his/her voluntary return to military control if they are aware of his/her whereabouts; by inquiring to the fullest extent possible into the feasibility of other explanations for the member's absence, to include sickness, injury, hospitalization, and confinement by civil law enforcement officials; and officially ordered diversion from his/her unit of assignment by querying the member's losing unit (and en route temporary duty unit), the appropriate career management division, the servicing replacement organization, and the servicing Military Personnel and Transportation Assistance Office (and (See Note 1)

N/A

That based on the aforesaid investigation, the undersigned has personal knowledge that, on or about 20091209 (Date - YYYYMMDD), Zackary B. Thompson, Private First Class (Name and rank of alleged deserter), did, without authority and with intent to remain away therefrom permanently, absent himself/herself from his/her unit/organization/place of duty, to wit: (See item 3 above) located at (See item 3) in violation of Section 885, Title 10, United States Code and he/she has remained continuously so absent until 20100108 (Date this statement is executed - YYYYMMDD). I state under penalty of perjury (under the laws of the United States of America (See Note 2) that the foregoing is true and correct. Executed on 20100108 (Date - YYYYMMDD).

**NOTES:**

1. For use only when a servicemember fails to report to a gaining unit of assignment during a permanent change of station.
2. For use only when statement is executed outside the United States, its territories, possessions and commonwealths.

**18. COMMANDING OFFICER**

a. TYPED NAME (Last, First, Middle Initial) Hatton, Jay L.	b. RANK Col	c. TITLE Commanding Officer
d. ORGANIZATION AND INSTALLATION CLR-3, 3D MLG	e. SIGNATURE (All capitals)	f. DATE SIGNED (YYYYMMDD) 20100108

**19. REMARKS (List peculiar habits and traits of character; unusual mannerisms and speech; peculiarities in appearance; clothing worn; aliases (names); marks and scars; tattoos; facial characteristics; complexion, posture; build, other SSN's used by individual; or other data that may assist in identification.**

C41910

**INFORMATION**

**1. AUTHORITY TO APPREHEND.**

a. Any civil officer having the authority to apprehend offenders under the laws of the United States, or of a State, territory, commonwealth, possession, or the District of Columbia may summarily apprehend deserters from the Armed Forces of the United States and deliver them into custody of military officials. Receipt of this form and a corresponding entry in the FBI's NCIC Wanted Person File, or oral notification from military officials or Federal law enforcement officials that the person has been declared a deserter and that his/her return to military control is desired, is authority for apprehension.

b. Civil authorities may apprehend absentees (AWOL's) when requested to do so by military authorities.

**2. PAYMENT OF REWARD OR REIMBURSEMENT FOR EXPENSES.**

a. Rewards. Receipt of this form, or oral or written notification from military authorities or Federal law enforcement officials, prior to apprehension of the individual, that the person is an absentee and that his/her return to military control is desired will be considered as an offer of reward. Persons or agency representatives (except salaried officers or employees of the Federal Government or servicemembers) apprehending or delivering absentees to military control are authorized:

- (1) Payment for apprehension and detention of absentees until military authorities assume custody; or
- (2) Payment for apprehension and delivery of absentees to a military installation.

b. Reimbursement for Expenses. Reimbursement may be made for actual expenses incurred when conditions for payment of a reward cannot be met. If two or more persons perform these services, payment will be made jointly or severally, but total payment to all may not exceed prescribed limitations.

c. Payment. Payment will be made to the person or agency representative actually making arrest and detention or delivery by the disbursing officer servicing the military facility to which the absentee is delivered and will be in full satisfaction of all expenses of

apprehending, keeping and delivering the absentee. Payment may be made whether the absentee surrenders or is apprehended. Payment will not be made for information leading to apprehension, nor for apprehension not followed by return to military control. Both reward and reimbursement may not be paid for the same apprehension and detention or delivery.

**3. INDIVIDUAL CLAIMS HE/SHE IS NOT ABSENT WITHOUT AUTHORITY.**

When a detained individual claims that he/she is not absent without leave and does not have the papers to prove his/her claim, the apprehending person or agency representative should communicate directly by the most rapid means available, with the nearest military installation manned by active duty personnel. When necessary, communicate directly (telephone or telegraph) with the Deserter Information Point of the military service concerned.

a. **US Army:** U.S Army Deserter Information Point  
ATTN: ATZK-PMF-D  
1481 Old Ironsides Avenue  
Fort Knox, KY 40121

**Telephone:** Area Code (502) 626-3711/  
3712/3713

b. **US Navy:** Navy Absentee Collection and  
Information Center (NACIC)  
2834 Greenbay Road  
North Chicago, IL 60064

**Telephone collect:** Area Code (847) 688-2106  
(or toll free: 1-800-423-7633)

c. **US Marine Corps:** Commandant, US Marine Corps  
Code POS-40  
2 Navy Annex  
Washington, DC 20380-1775

**Telephone collect:** Area Code (703) 614-3248/3376

d. **US Air Force:** Headquarters AF Personnel Center  
(DPWCM)  
550 C Street West, Suite 14  
Randolph AFB, TX 78150-4716

**Telephone collect:** Area Code (210) 566-3752  
(or toll free: 1-800-531-5501)

Diary #: 00433

041911



**UNITED STATES MARINE CORPS**

COMBAT LOGISTICS REGIMENT 3

3D MARINE LOGISTICS GROUP

UNIT 38416

FPO AP 96604-8416

IN REPLY REFER TO:

T5800

CO

15 DEC 2009

From: Commanding Officer, Combat Logistics Regiment 3  
To: Officer In Charge, Installation Personnel Administration  
Center (ATTN: LEGAL SECTION)

Subj: UNAUTHORIZED ABSENCE ICO PRIVATE FIRST CLASS ZACKARY B.  
THOMPSON XXX XX 3084/3521 USMC

1. This letter is to certify the unauthorized absence of Private First Class Zackary B. Thompson as of 0900, 9 December 2009. SNM was last seen at Point Loma Naval Hospital, at 0730, 9 December 2009.

2. Questions pertaining to this matter may be addressed to the Regimental Adjutant at DSN 645-7871.

*J. M. Arenas*  
J. M. ARENAS  
By direction

Unit Diary #: 71834

041912



UNITED STATES MARINE CORPS  
COMBAT LOGISTICS REGIMENT 3  
3D MARINE LOGISTICS GROUP  
UNIT 38416  
FPO AP 96604-8416

IN REPLY REFER TO:  
5800  
LEG  
DEC 21 2009

Mr. & Mrs. Walter M. Thompson  
3200 Stonewall Road  
Huntsville, AL 35763

Dear Mr. and Mrs. Thompson:

I regret to inform you that your son, Private First Class Zackary B. Thompson, USMC has been absent from this organization since 9 December 2009. If you know where he is, please tell him to contact us immediately and return. Absence without leave is a serious military offense that becomes more serious as the length of absence increases.

If Private First Class Thompson remains absent for more than 30 days, he will be declared a deserter and we will ask civil law enforcement authorities to assist in his apprehension.

I do not want your son to become a fugitive. If he does not have enough money to cover the return trip to this command, or if you need further assistance, please call the Marine Corps representative at (703) 696-2031 or 696-2032, or call the Marine Corps representative listed in your phone book under "United States Government". If I can be of any assistance in this matter, please call me at 011-81-98-970-2236, 011-81-98-970-3969, or 011-81-98-970-7871, or write me at Commanding Officer, Combat Logistics Regiment 3, 3d Marine Logistics Group, Unit 38416, FPO AP 96604-8416.

Sincerely,

J. W. HARMAN  
Major, U.S. Marine Corps  
Acting

041913

**CONFINEMENT ORDER**

<b>1. PERSON TO BE CONFINED</b>		<b>2. DATE (YYYYMMDD)</b>
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	d. TIME 0800
---	--	----------------------------------	-----------------

8.a. NAME, GRADE, TITLE OF LEGAL REVIEW AND APPROVAL: Layme M. Arenas, O-3, Legal Officer	b. SIGNATURE: 	c. DATE (YYYYMMDD) 2010 02 25
--	---	----------------------------------

**MEDICAL CERTIFICATE**

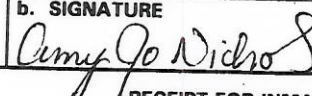
9a. The above named inmate was examined by me at 0100 on 20100226 and found to be  Fit  Unfit for confinement. I certify that from this examination the execution of the foregoing sentence to confinement  will  will not produce serious injury to the inmate's health.

b. The following irregularities were noted during the examination (If none, so state):

c. HIV Test administered on (YYYYMMDD): 20091123

d. Pregnancy test administered on (YYYYMMDD):                       N/A

**10. EXAMINER**

a. TYPED NAME, GRADE AND TITLE: NICHOLS Amy LT MC ASN	b. SIGNATURE: 	c. DATE (YYYYMMDD) 20100226	d. TIME 0100
--	--	--------------------------------	-----------------

**RECEIPT FOR INMATE**

11.a. THE INMATE NAMED ABOVE HAS BEEN RECEIVED FOR CONFINEMENT AT: CAMP HANSEN BASE BRIG  
(Facility Name and Location)  
 ON 20100226 AND TIME: 0103  
(YYYYMMDD) (Time)

b. PERSON RECEIPTING FOR INMATE TYPED NAME, GRADE AND TITLE: <u>Scriminski, J.A. SSGT/DRS</u>	c. SIGNATURE: 	d. DATE (YYYYMMDD) 20100226	e. TIME 0103
---	--	--------------------------------	-----------------

**DESERTER INFORMATION POINT NOTIFICATION**  
**NAVMC HQ 902 (5-97)**

UA/DES	10-0149
RMC TIME/DATE	0030/20100222
RECEIVED BY	SGT WALLACE

TIME/DATE  
2115/20100221

I. ABSENTEE INFORMATION		II. VERIFICATION SOURCES					
NAME: THOMPSON, ZACKARY B.		KCT S	MQG	NCIC XXX	DD553 XXX	MICROF	SRB
SSN: 417-35-3084	RANK: PFC/E-2	BY UNIT: NAME				RANK	
TIMES & DATE: <input checked="" type="checkbox"/> UA <input type="checkbox"/> DES 0900/20091209		PHONE		UNIT			

III. CIRCUMSTANCES				
SURRENDERED	APPREHENDED XXXXXXXXXX	PAST EDA	HOSP.	TIME/DATE & LOCATION 2115/20100221 AL

IV. UNIT INFO				
MOS 3521	MCC 1CA	RUC 13160	SRB HELD: <input type="checkbox"/> YES <input type="checkbox"/> NO	UNIT UA/DES FROM CLR3, OKINAWA, JP

UNIT TO BE ASSIGNED <u>CLR-3, OKI, JPN</u>	VERIFIED BY DIP SGT WALLACE	APPROVED BY <u>By Sgt Conner</u>	DATE <u>100222</u>
---	--------------------------------	-------------------------------------	-----------------------

V. DETENTION INFORMATION	
TO MCACU DC	"BY/DIR"

(1) DEPARTMENT HUNTSVILLE METRO JAIL	PHONE (256) 519-4800/ 722-7100
---	-----------------------------------

STREET ADDRESS 815 WHEELER ST.	CITY HUNTSVILLE	STATE AL	ZIP
-----------------------------------	--------------------	-------------	-----

(2) DEPARTMENT	PHONE
----------------	-------

STREET ADDRESS	CITY	STATE	ZIP
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VI. CIVIL CHARGES			
YES	NO <input checked="" type="checkbox"/>	BOND	EXPLAIN ***NONE***
COURT DATE			

PICK-UP DATE/TIME ASAP	PROJECTED RELEASE DATE
---------------------------	------------------------

RISKS OR UNUSUAL CIRCUMSTANCES: ESCP, FLIGHT RISK, SUICIDAL, ETC.

VII. CALLER INFORMATION				
NAME OFFICER LAMBERT		PHONE (256) 722-7100	DATE 20100221	
DEPARTMENT HUNTSVILLE POLICE DEPT.	STREET ADDRESS		CITY HUNTSVILLE	STATE AL
			ZIP CODE	

041915



**VIII. ACTION TAKEN**

UNIT NOTIFIED DC		PHONE (703) 614 -1480
INDIVIDUAL NOTIFIED <i>67867 EARW600</i>	TIME 0800	DATE 20100222

**IX. ACTION COMPLETED**

DD553 IN A WAITING 616 FILE		1,2,3
DATE <u>2010-02-21</u>	INTL _____	DATE _____ INTL _____
MQG ACTION COMPLETED		NCIC CLEARED
DATE _____	INTL _____	DATE _____ INTL _____
TRANSPORT UNDER GUARD MESSAGE	MCACU TRACKING	APP REQUEST LOGBOOK CHECKED
DATE _____ INTL _____	DATE _____ INTL _____	DATE <u>2010-02-21</u> INTL _____
SIGNATURE		SNCOIC DIP (INTL)

**X: REMARKS: (INCLUDING DATE/TIMES AND INITIALS, REASON FOR ARREST, DESCRIPTION MATCH, RELEASE DATE, POC....)**

20100221: SND WAS PICKED UP ON A APP REQUEST BY CPL CORIDEAU. ALL ID'S MATCH. KEW

20100221: SND ABSENT UNDER 180 DAYS...RETURN TO PARENT COMMAND PER MCO 5800.16A WITH CHANGE TO 1-5 CHAPTER 5.KEW

*20100222: DIP SNCOIC CONCURS. gpc*

041916

ARTICLES RETURNED TO PRISONER'S UNIT

20100226  
DATE

QTY	ITEM	QTY	ITEM
1	CIVILIAN T SHIRT	/	/
1 PR	CIVILIAN SHORTS		
1 PR	CIVILIAN SHOES		
1	KEY CHAIN		
1	FSUB VISA		
1	WALLET WITH CONTENTS		
1	HR. BLOCK MASTER CARD		
1	ALABAMA ID		
1	POLD SHIRT		
1	BALL CAP		
1	BIBLE WF		
1	BELT		

Items listed above are returned to unit for delivery to 1stSgt.

THOMPSON, ZACKARY  
PRISONER'S NAME (PRINTED)

[Signature]  
SIGNATURE

Kyle GAWRY CPA  
CHASER'S NAME/RANK (PRINTED)

[Signature]  
SIGNATURE

CIR-3 GSMT MTM 645-4009  
UNIT AND UNIT PHONE NUMBER

CPL FRY  
C&R NCO'S NAME/RANK (PRINTED)

[Signature]  
SIGNATURE

041917



UNITED STATES MARINE CORPS

MARINE CORPS BRIG  
MARINE CORPS BASE, CAMP SMEDLEY D. BUTLER  
FPO AP 96373-5024

Date: 20100226

From: Commanding Officer, Marine Corps Brig  
To: Commanding Officer, COL HATTON

Subj: REQUIRED ITEMS FOR CONFINEMENT

- The below listed articles are required for confinement.
- All missing articles must be delivered to the brig on the day following confinement. For further questions, contact the Programs Chief at 623-4940.

CLOTHING	REQUIRED	ON HAND	NEED
Service Issued Boots <b>NO STEEL TOE</b>	2	<u>0</u>	<u>2</u>
Drawers, white	6	<u>0</u>	<u>6</u>
Service Issued Undershirt	6	<u>0</u>	<u>6</u>
Socks: Black, Green, White	6 PR	<u>2</u>	<u>6</u>
Shoes, Running/Court	2 EA	<u>1</u>	<u>2</u>
Service Issue PT Shorts	2	<u>0</u>	<u>2</u>
Service Issue Sweats	2 PR	<u>0</u>	<u>2</u>
<b>SEASONAL</b>			
HEALTH AND COMFORT	REQUIRED	ON HAND	NEED
Laundry Bag	2	<u>0</u>	<u>2</u>
Writing Tablet	2	<u>0</u>	<u>2</u>
Non-Mechanical Pen	2	<u>0</u>	<u>2</u>
<b>NON-GOVERNMENT</b>			
Shower Shoes	2	<u>0</u>	<u>2</u>
Disposable Razors	10	<u>0</u>	<u>10</u>
Non-Gel Shaving Cream	2	<u>0</u>	<u>2</u>
Toothbrush w/Case	2	<u>2</u>	<u>2</u>
Toothpaste	2	<u>0</u>	<u>2</u>
Towel, Whit/Green	2	<u>1</u>	<u>2</u>
Face Cloth, White/Green	2	<u>1</u>	<u>2</u>
Soap Bars, W/Case	2	<u>2</u>	<u>2</u>
Nail Clippers	2	<u>0</u>	<u>2</u>
Comb or Brush	2	<u>0</u>	<u>2</u>
Deodorant (Stick Style)	2	<u>0</u>	<u>2</u>
Money, Cash, M.O., Gov Check	\$100.00	<u>2</u>	<u>2</u>
Medical Records	2	<u>0</u>	<u>2</u>
Dental Records	2	<u>0</u>	<u>2</u>

Kyle Gentry  
ESCORT'S NAME

(1R) Gsmt mjm 645-4009  
UNIT AND UNIT PHONE NUMBER

LPL FRY  
R&R NCO NAME

[Signature]  
SIGNATURE

1st Sgt McDowell  
CO 1<sup>ST</sup>SGT OR GYSGT

[Signature]  
SIGNATURE

041918

**UNITED STATES MARINE CORPS  
MARINE CORPS ABSENTEE COLLECTION UNIT  
2 NAVY ANNEX  
WASHINGTON DC  
PHONE: (703) 614-2934  
FAX: (703) 614-3499**




**DELIVER TO  
COMMANDING OFFICER OF:  
CLR-3 OKINAWA, JAPAN**

**NAME: THOMPSON ZACKARY, B  
SSN: 417-35-3084  
RANK: PFC**


**ESCORTED BY: SGT EVANS & CPL CARIDEO**

041919

**RECIPT FOR INMATE OR DETAINED PERSON**

1. RECEIVED FROM (Unit or Agency and Station) <b>HUNTSVILLE METRO JAIL</b>		2. TIME <b>0410</b>	3. DATE (YYYYMMDD) <b>20100224</b>
4. INMATE NAME (Last, First, Middle) <b>THOMPSON , SACKARY B</b>		5. SSN <b>417-35-3084</b>	6. GRADE <b>E-2</b>
7. ORGANIZATION <b>USMC</b>		8. STATION <b>CLR-3 OKINAWA, JAPAN</b>	
9. OFFENSE <b>DATE OF DESERTION (FROM: 20091209 TO: 20100222 )</b>			
10. PERSONAL PROPERTY <b>CUSTODY OF CHASERS</b>			
11. REMARKS <b>NONE</b>			
12. NAME AND TITLE OF PERSON RECEIVING ABOVE INDIVIDUAL <b>EVANS</b>		13. SSN <b>5581</b>	14. GRADE <b>E-5</b>
15. RECEIVING UNIT AGENCY AND STATION <b>MARINE CORPS ABSENTEE COLLECTION UNIT, WASHINGTON, DC</b>		16. SIGNATURE 	

**RECIPT FOR INMATE OR DETAINED PERSON**

1. RECEIVED FROM (Unit or Agency and Station) <b>MARINE CORPS ABSENTEE COLLECTION UNIT, WASHINGTON, DC</b>		2. TIME <b>2130</b>	3. DATE (YYYYMMDD) <b>20100225</b>
4. INMATE NAME (Last, First, Middle) <b>THOMPSON , SACKARY B</b>		5. SSN <b>417-35-3084</b>	6. GRADE <b>E-2</b>
7. ORGANIZATION <b>USMC</b>		8. STATION <b>CLR-3 OKINAWA, JAPAN</b>	
9. OFFENSE <b>DATE OF DESERTION (FROM: 20091209 TO: 20100222 )</b>			
10. PERSONAL PROPERTY <b>CUSTODY OF CHASERS</b>			
11. REMARKS <b>NONE</b>			
12. NAME AND TITLE OF PERSON RECEIVING ABOVE INDIVIDUAL <b>Kyle Crawley</b>		13. SSN <b>4503</b>	14. GRADE <b>CPI E-4</b>
15. RECEIVING UNIT AGENCY AND STATION <b>CIR-3</b>		16. SIGNATURE 	

041920

APPREHENSION NOTIFICATION DATA SHEET  
VERIFICATION OF DESERTER IDENTITY

	<u>DATA OF DESERTER</u>	<u>DATA OF PRISONER</u>
FULL NAME	THOMPSON, ZACHARY B.	<div style="border: 1px solid black; width: 100%; height: 100%; transform: rotate(-45deg); display: flex; align-items: center; justify-content: center;"> <span style="font-size: 2em; font-weight: bold;">* VERIFIED *</span> </div>
SSN	417-35-3084	
DATE OF BIRTH	19891229	
PLACE OF BIRTH	MADISON, AL	
SEX	MALE	
RACE	WHITE	
HEIGHT	70"	
WEIGHT	185	
EYE COLOR	BRN	
HAIR COLOR	BRN	
DOES SUBJECT ADMIT TO BEING A DESERTER?		<input checked="" type="radio"/> YES <input type="radio"/> NO
SOURCE OF PRISONER DATA	MS - <del>ROBERTS</del> MCNAMARA	ACIC OPERATOR HUNTSVILLE
REMARKS		





\_\_\_\_\_  
 DIP WATCHSTANDER                  DIP SNCOIC                  DESERTER OFFICER

NOTES

1. ALL INFORMATION WILL BE OBTAINED UPON NOTIFICATION OF ANY APPREHENSION. DIFFERENCES IN ANY OF THE INFORMATION ABOVE WILL BE IMMEDIATELY REVIEWED TO VERIFY IDENTITY. THE DIP SNCOIC WILL REFER ANY QUESTIONABLE CASES TO THE DESERTER OFFICER.
2. VERIFY WITH DESERTER WHOM NEEDS TO BE RE-ASSIGNED IF HE/SHE WERE PENDING CHARGES OTHER THAN CURRENT UA/DES AT PARENT COMMAND. ANNOTATE RESULTS IN REMARKS SECTION OF THIS FORM.
3. IF THE SOURCE OF PRISONER DATA IS A PHONE CONVERSATION, OBTAIN THE VERIFIERS NAME AND POSITION WITHIN THE AGENCY. MAKE EVERY REASONABLE EFFORT TO OBTAIN A COPY OF A SOURCE DOCUMENT AND FILE IT PERMANENTLY WITH THE UA/DES.
4. THIS DATA SHEET WILL REMAIN A PERMANENT ENCLOSURE TO THE UA/DES.

041921