

# CLEMENCY ACTION RECORD

For use of this form, see AR 15-130; the proponent agency is OSA

LAST NAME	FIRST NAME	MIDDLE INITIAL
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## SECTION I - RECOMMENDATIONS OF THE ANALYST

<input type="checkbox"/>	<input type="checkbox"/>	NO CLEMENCY	OTHER
<input type="checkbox"/>		REMIT IN EXCESS OF YRS	
<input type="checkbox"/>		REMIT UNEX PORTION OF SENTENCE TO CNF	
<input type="checkbox"/>		GRANT DISCHARGE	
<input type="checkbox"/>	<input type="checkbox"/>	HON <input type="checkbox"/> GEN <input type="checkbox"/> UTOHC <input type="checkbox"/> BCD	
<input type="checkbox"/>		TRANSFER RETRAINING BRIGADE	

SIGNATURE OF ANALYST	DATE
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## SECTION II - RECOMMENDATIONS OF THE ARMY CLEMENCY AND PAROLE BOARD

<input type="checkbox"/>	<input type="checkbox"/>	NO CLEMENCY	OTHER
<input type="checkbox"/>		REMIT IN EXCESS OF YRS	
<input type="checkbox"/>		REMIT UNEX PORTION OF SENTENCE TO CNF	
<input type="checkbox"/>		GRANT DISCHARGE	
<input type="checkbox"/>	<input type="checkbox"/>	HON <input type="checkbox"/> GEN <input type="checkbox"/> UTOHC <input type="checkbox"/> BCD	
<input type="checkbox"/>		TRANSFER RETRAINING BRIGADE	

SIGNATURE OF BOARD CHAIRMAN	DATE
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SIGNATURE OF MILITARY MEMBER	SIGNATURE OF MILITARY MEMBER	DATE
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## SECTION III - APPROVING AUTHORITY ACTION

<input type="checkbox"/> APPROVED	<input type="checkbox"/> DISAPPROVED	DATE
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BY ORDER OF THE SECRETARY OF THE ARMY