

OFFICER PHOTOGRAPH

SUPPORTING DIRECTIVE MILPERSMAN
ARTICLE 1070-180

PRIVACY ACT STATEMENT

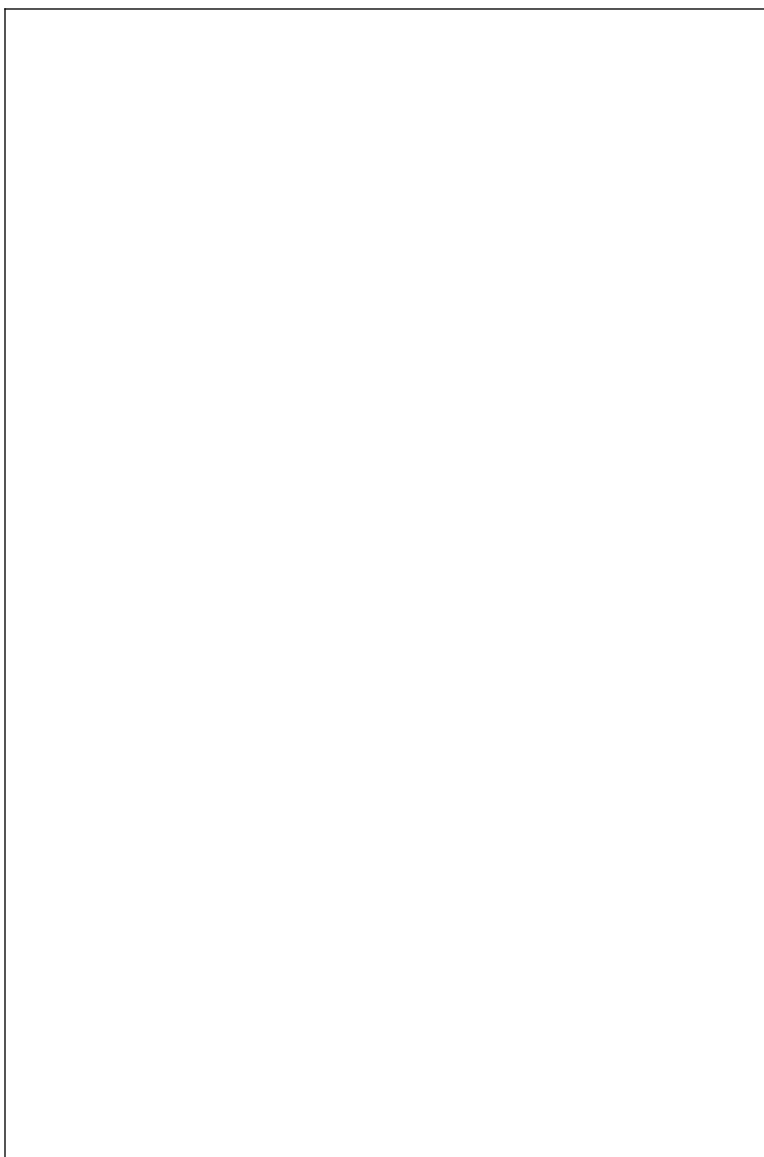
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DISCLOSURE: COMPLETION OF THIS FORM AND SUBMISSION OF THE PHOTOGRAPH IS MANDATORY.

1. NAME (LAST, FIRST, MI):	2. GRADE:	3. SSN (FULL):	4. DESIGNATOR:	5. DATE PHOTO TAKEN (YYYYMMDD):
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6. MEMBER'S FULL SIGNATURE: