



MARFORCOM
COMMAND INSPECTOR GENERAL
“The Eyes and Ears of the Commander”
HOTLINE COMPLAINT FORM



PRIVACY ACT STATEMENT

AUTHORITY: Title 10 USC 141; DoDD 5106.04; DoDI 5106.05

PRINCIPAL PURPOSE(S): To secure sufficient information to inquire into the matters presented and to provide a response to the requestor(s) and/or take action to correct deficiencies.

ROUTINE USE(S): Information is used for official purposes within the Department of Defense; to answer complainants or respond to requests for assistance, advice, or information by members of Congress and other government agencies when determined by the Inspector General to be in the interest of the Department of Defense; and in certain cases, in trial by courts-martial and other military matters as authorized by the Uniform Code of Military Justice. Department of Defense “Blanket Routine Uses” also apply.

DISCLOSURE: Disclosure of personal information is voluntary; however, failure to provide complete information may hinder proper identification of the the requestor, accomplishment of the requested action(s), and response to the requestor.

I. Privacy/Confidentiality/Anonymity

Note: Any information that you provide to the IG has a reasonable expectation of privacy.

A. Are you willing to be interviewed?

YES___ NO___

B. Do you wish to remain confidential?

YES___ NO___

Note: If YES, identify yourself in Part III. Every effort will be made to protect your identity from disclosure; however, we cannot guarantee confidentiality since disclosure may be required during an investigation or in the course of corrective action.

C. Do you wish to remain anonymous?

YES___ NO___

Note: If YES, DO NOT identify yourself in Part III. Anonymous complaints lacking sufficient information may not get resolved. Additionally, an anonymous complainant (you) will not receive a final response.

D. Have you previously contacted any of the following regarding this complaint?

_____ Chain of command; Date of Contact _____

_____ Inspector General of the Marine Corps; Date of Contact _____

_____ Department of Defense Inspector General; Date of Contact _____

_____ Congressional Office (Specify) _____; Date of Contact _____



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_____ Media (Specify) _____; Date of Contact _____

_____ Other (Specify) _____; Date of Contact _____

II. Complainant Information

First Name: _____ MI: ____ Last Name: _____

Address: _____

City: _____ State: ____ Zip: _____

Country: _____

Contact phone number: _____ Preferred method? ____

Contact email address: _____ Preferred method? ____

If you are making a complaint on behalf of another person, state your relationship:

III. Request Details

A. WHO IS INVOLVED? *Be sure to include names, ranks, duty position, organization and phone number or email where they can be reached.*

Subject(s): *Who performed the wrongdoing?*

Witness (es): *List any witnesses that can verify your statements*

B. WHAT DID THE SUBJECT(S) DO, OR FAIL TO DO, THAT WAS WRONG? *Be specific as possible with names, dates, times, and places to provide maximum level of detail. Attach supporting documentation, if applicable.*



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C. WHAT RULE, REGULATION, OR LAW DO YOU THINK THE SUBJECT(S) VIOLATED? *Does not have to be specific; but please describe in detail what you think was violated.*

D. WHEN DID THE INCIDENT(S) OR VIOLATION(S) OCCUR? *Provide date(s) & time(s).*

E. WHERE DID THE INCIDENT(S) OR VIOLATION(S) OCCUR? *Location, section, building number, etc.*

F. WHY DO YOU THINK THE INCIDENT(S) OR VIOLATION(S) TOOK PLACE?

G. HAVE YOU ATTEMPTED TO RESOLVE THE PROBLEM? *If YES, describe what you did.*

H. WHO ELSE HAVE YOU CONTACTED ABOUT YOUR COMPLAINT? *Be sure to include names, ranks, duty position, organization, and a phone number or email where these individuals can be reached.*

I. WHAT DO YOU WANT THE INSPECTOR GENERAL TO DO TO RESOLVE YOUR COMPLAINT?



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IV. Validation & Acknowledgement

I certify that all of the statements made in this complaint are true, complete, and correct, to the best of my knowledge. I understand that knowingly providing false information could potentially violate 18 USC § 1001 and subject to criminal action; and for members of the Armed Forces, subject to potential punitive and administrative action under UCMJ Article 107.

Signature _____ Date _____

This form is provided for individuals to submit an outline of information the Command Inspector General requires to conduct an analysis of the complaint. The complaint can be sent via e-mail, postal mail or hand delivered to our office at MARFORCOM ANNEX, Building NH-45, Second Floor, Room 218. Contact and mailing information:

HOTLINE:

PHONE: 757-836-2128

E-MAIL: OMB.MARFORCOM.IG@USMC.MIL

MAIL:

Commander, MARFORCOM
Attn: Command Inspector General
1775 Forrestal Drive
Norfolk, VA 23551-2400

If you have any questions or need assistance with completing the form, please contact us.