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| DEPARTMENT OF HOMELAND SECURITYU.S. COAST GUARD**ADMINISTRATIVE REMARKS** |
| **PRIVACY ACT STATEMENT** Pursuant to 5 U.S.C. §552a(e)(3), this Privacy Act Statement serves to inform you of why DHS is requesting the information on this form.**AUTHORITY**: 14 U.S.C. § 505**PURPOSE**: To document a USCG service member’s achievements, accomplishments, Uniform Code of Military Justice (UCMJ) infraction(s), or any other USCG military pay or personnel activity.**ROUTINE USES:** Authorized USCG officials will use this information to validate a USCG service member’s achievements, accomplishments, UCMJ infraction(s) or any other USCG military pay or personnel activity. Any external disclosures of information within this record will be made in accordance with DHS/USCG-014, Military Pay and Personnel, 76 Federal Register 66933 (October 28, 2011).**CONSEQUENCES OF FAILURE TO PROVIDE INFORMATION:** Providing this information is voluntary. However, failure to provide this information may result in a delay in administrating this form. |
| Entry Type: Performance and Discipline (P&D-27)Reference: Discipline and Conduct, COMDTINST 1600.2 (series)Responsible Level: UnitEntry: DDMMMYYYY: You are advised that as the subject of a (Enter: "Restraining Order" or "Military Protective Order) issued on (Enter: Date), you are prohibited from accessing or possessing firearms or ammunition as explained in Discipline and Conduct, COMDTINST M1600.2, for the duration of the order. You are advised that this prohibition is a federal law and applies to personally owned firearms and ammunition, as well as government owned firearms and ammunition. Possession of any firearm or ammunition, including those previously privately owned, for the duration of the order, is a violation of the law as contained in 18. U.S.C. Section 922 and if you are found to be in the possession of a firearm or ammunition, you may be prosecuted by the civilian authorities or punished under the Uniform Code of Military Justice.A. B. SEA, CAPT, USCGCommanding OfficerDDMMMYYYY: I acknowledge the above entry, and fully understand the restrictions and prohibitions described above.JOHN P. JONES |
| 1. NAME OF PERMANENT UNIT

      | 1. NAME OF UNIT PREPARING THIS FORM

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| 1. NAME OF MEMBER (Last, First, MI)

      | 1. EMPLOYEE ID NUMBER

      | 1. GRADE/RATE

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Scan original into member's OMPF

CG-3307 (09/23)

Expiration: 09/33

PREVIOUS EDITIONS ARE OBSOLETE

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