



UNITED STATES MARINE CORPS

(Command Name & Address)

PSC BOX *number*

CAMP LEJEUNE, NC *Zip Code*

IN REPLY REFER TO:

1700

ADJ

*Date Stamp*

From: Commanding Officer, *Command's Name*

To: *Name of Designee*

Subj: APPOINTMENT AS THE *COMMAND'S NAME* EXCEPTIONAL FAMILY MEMBER PROGRAM  
(EFMP) COMMAND LIAISON

REF: MCO 1754.4B

1. Effective this date, you are hereby appointed as the *Command Abbreviation* EFMP Command Liaison. You are directed to familiarize yourself with the contents of the reference.

2. In addition to your billet responsibilities listed in the reference, you will also be responsible for monitoring the EFMP status of *Command Abbreviation* personnel, publicizing EFMP events and resources to EFMP families, and serve as liaison with the staff of the Camp Lejeune EFMP program.

3. As the appointed Command EFMP Liaison you can request a roster of EFMP enrolled personnel. This roster may be used to identify Marines who are not in compliance with the requirement to update their EFMP paperwork (DD2792) every three years and direct these Marines to provide updated paperwork. This report should not be accessible to any person other than the commander or their specified designee. This information should not be maintained in any other unit records including service record books or fitness reports.

4. Your appointment will remain in effect until such time as you are properly relieved.

*Commanding Officer's Signature*

*Name Typed*

ADJ

*Date Stamp*

FIRST ENDORSEMENT

From: Commanding Officer, *Command's Name*

To: *Name of Designee*

1. I have read and familiarized myself with the contents of the reference. I have assumed all duties as the *Command Abbreviation* EFMP Command Liaison.

*Designee's Signature*

*Name Typed*