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MARINE CORPS ORDER P1751.3F

From: Commandant of the Marine Corps

To: Distribution List

Subj: DEPENDENCY DETERMINATION AND BASIC ALLOWANCE FOR HOUSING

(BAH) MANUAL

Ref: (a) DODFMR 7000.15-R, Volume 7, Part A

(b) MCO P5800.16A W/Change 1-3, Chapter 15, LEGADMINMAN

(c) MCO P1080.39B, AIMMS

(d) MCO P1080.40C, MCTFSPRIM

(e) MCO P5512.11C, IDCARDMAN

(f) MCO P5211.2B, PRIVACY ACT OF 1974

(g) DFAS P2220.31-R

Encl: (1) LOCATOR SHEET

- 1. $\underline{\text{Purpose}}$. To provide guidance and instructions for the submission of applications for dependent determination of eligibility and BAH for Marines with dependents, and related matters, per references (a) through (g).
- 2. Cancellation. MCO P1751.3E.
- 3. <u>Summary of Revision</u>. This Manual has been revised and retitled. It contains a substantial number of changes and must be reviewed in it's entirety. It also changes the occasions and procedures for submission of applications and accompanying documentation requirements.
- 4. <u>Recommendations</u>. Submit recommendations concerning dependency determination and entitlement to BAH procedures to the CMC (MRP-1) via the appropriate chain of command.

MCO P1751.3F 24 Dec 03

Subj: DEPENDENCY DETERMINATION AND BASIC ALLOWANCE FOR HOUSING (BAH) MANUAL

5. <u>Certification</u>.

- a. This Manual is effective the date signed.
- b. This Marine Corps Manual is applicable to the Marine Corps Total Force.

GARRY/L. PARKS

Deputy Commandant for Manpower and

Reserve Affairs

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LOCATOR SHEET

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INTRODUCTION

- 0000. <u>AUTHORITY</u>. Under 37 U.S.C. 401, a member of the Armed Forces who is entitled to basic pay is entitled to BAH when the Government does not provide adequate family quarters for the member and the member's dependents. If a member does not have a dependent as defined in reference (a), the member may be entitled to BAH at the "without-dependent" rate. If a member has one or more dependents, the member may be entitled to BAH Without Dependents and BAH DIFF when monthly child support is paid. BAH DIFF entitlement is based on child support only.
- 0001. <u>ELIGIBILITY</u>. Reference (a) contains information relative to eligible dependents and those considered eligible for BAH purposes. Eligible dependents include spouse, parent(s), parent(s)-in-law, step-parent(s), adoptive parent(s), in loco parentis, legitimate child(ren), stepchild(ren), incapacitated child(ren), adopted child(ren), pre-adopted child(ren), child(ren) from the age of 21 to the date of their 23rd birthday who are enrolled in a full-time course of study in an institution of higher education, dependent child(ren), and court appointed wards.
- 0002. $\underline{\text{COMMANDING OFFICERS}}$. Commanding officers are defined by this Manual as those officers who are responsible for the input of information into the Marine Corps Total Force System (MCTFS) by the assignment of a reporting unit code.
- 0003. $\underline{\text{NONELIGIBLE DEPENDENTS}}$ The following are noneligible dependents for BAH purposes:
- 1. Divorced spouse of the Marine, regardless of whether alimony was awarded.
- 2. A child not related to the Marine by blood or marriage, unless adopted by the Marine.
- 3. A stepchild after divorce of the Marine from the natural parent, unless adopted by the Marine. (NOTE: The relationship of the stepchild(ren) does not dissolve upon the death of the natural parent if the stepchild remains in the Marine's household.)
- 4. A Marine's child who is adopted by a third party.

- 5. Brothers, sisters, aunts, uncles, grandparents, or any other relative, unless such a relative qualifies as a court-appointed ward or stood "in loco parentis" for a minimum of 5 consecutive years prior to the Marine becoming 21 years of age.
- 6. Stepparent after divorce from the natural parent, unless an "in loco parentis" relationship exists. (NOTE: The relationship of the stepparent does not dissolve upon the death of the natural parent if the stepparent remains financially dependent upon the member for over 50 percent monthly support and the stepparent does not remarry.)
- 7. A dependent supported and claimed for BAH purposes by another U.S. servicemember.
- 8. Another active duty member of the Armed Forces, a Dependency Application, NAVMC Form 10922, is not required when a Marine is married to another active duty member of the Armed Forces and no other dependents are involved.
- 9. A disabled child, unmarried, and over the age of 21 may be eligible for other benefits only if incapacity was incurred prior to attainment of that age, and the child is, or was at the time of the members death, dependent upon the sponsor for more that 50 percent of the child's support.
- 0004. <u>DETERMINING ENTITLEMENT TO BAH</u>. Reference (a) designates the authority for determining relationship or dependency for BAH. The provisions of the Department of Defense Financial Management Regulation (DODFMR) must be strictly followed to prevent the erroneous payment of Government funds, and the undue hardship on the Marine resulting from recoupment of overpayments.
- 0005. WAIVER OF THE REQUIREMENT TO SUPPORT DEPENDENT SPOUSE SUBSEQUENT TO RECEIPT OF BAH. Reference (b) at Chapter 15 established the Marine Corps policy regarding the financial support of family members. It also provides a process whereby a Marine may request a modification of the spousal support standards established therein. Marines are obligated to support all of their lawful dependents when that Marine is receiving BAH. BAH entitlement is contingent on the Marine providing adequate support to dependents. If a Marine believes that the spouse no longer warrants support, the commanding officer, on behalf of the Marine, may request a waiver of the requirement from the General Court Martial authority.

0006. COMPLAINTS OF NONSUPPORT AND INADEQUATE SUPPORT OF DEPENDENTS. Complaints alleging inadequate support of family members shall be directed to the commanding officer of the Marine concerned in accordance with the provisions of Chapter 15 of reference (b). Generally, proof of support of a lawful spouse or child of a member is not required. However, when evidence (e.g., special reports; record reviews; fraud, waste and abuse complaints; sworn testimony of individuals; or statements by member) or complaints from dependents of nonsupport or inadequate support are received, proof of adequate support will be required. Note that failure to provide adequate support to a dependent on whose behalf BAH is being received, may render the Marine ineligible for BAH under applicable regulations. See Department of Defense Financial Management Regulation (DoDFMR), Paragraph 260406.B.

0007. WAIVER OR DECLINATION OF SUPPORT. The submission of a written statement by a lawful spouse waiving or declining support for himself/herself and child(ren) will be considered sufficient authority to terminate credit for BAH. The issue of support waivers is addressed in Chapter 15 of reference (b).

CHAPTER 1 MEMBER'S SPOUSE AND CHILDREN/WARDS

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CHAPTER 1

MEMBER'S SPOUSE AND CHILDREN/WARD

1000. GENERAL INFORMATION. Officers may certify their entitlement to BAH by signing the Dependency Application, NAVMC Form 10922, as both the claimant and the attesting officer. Officers are only required to submit supporting documents in substantiation of their entitlement when claiming: dependent parents, adoptive parents, parents-in-law, in loco parentis, stepparents, wards, unmarried children from the age of 21 to the date of their 23rd birthday enrolled in a full-time course of study in an institution of higher education, a dependent certified incapacitated by competent officials, and a divorce obtained in a foreign nation. Forward questionable claims to the CMC (MRP-1). Appropriate diary action will be accomplished by the CMC (MRP-1) on those dependents approved at the CMC level. All other diary action will be accomplished by the command.

1001. APPROVAL LEVEL OF ACCEPTABLE FORMS OF MARRIAGE

- 1. United States Ceremonial Marriages. Commanding officers may approve a NAVMC Form 10922 involving a marriage contracted within the United States, or its territories by a legal civil or religious ceremony. The marriage certificate must be viewed by the attesting officer. In no case is the commanding officer authorized to disapprove a NAVMC Form 10922.
- 2. <u>Foreign Marriages</u>. Commanding officers may approve a NAVMC Form 10922 involving a marriage contracted in a foreign country, after the attesting officer views the translated marriage certificate. In all cases requiring a dependency determination, an English translation of the marriage certificate will be forwarded to the CMC (MRP-1), with the NAVMC Form 10922. For further assistance, the Marine should seek advice from their local Legal Assistance Office (JA).
- 3. <u>Indian Tribunal Marriages</u>. In states which recognize Indian tribal law and custom, such marriages and divorces are acceptable provided both were members of Indian tribes. Indian tribes are recognized by the Government as distinct political entities. Tribal marriages and divorces are not recognized for persons who do not live as part of the tribe or on a reservation. Even though someone may be of Indian blood, they are otherwise governed by the law of the state of their domicile. A NAVMC Form 10922, for an Indian tribal marriage must be forwarded to the CMC (MRP-1) for determination and/or approval.

- 4. <u>Common-Law Marriages</u>. A common-law marriage is an informal marriage recognized as valid in some states and in some foreign countries. For a common-law marriage to be valid, three required documents must be provided:
 - a. a present mutual intent of the parties to contract a marriage;
 - b. proof of cohabitation; and
- c. a representation to the public by the parties that they are husband and wife.

A common-law marriage, if valid where contracted, is valid elsewhere. Cohabitation alone will not create a common-law marriage. A NAVMC Form 10922, with supporting documentation, must be forwarded to the CMC (MRP-1) for determination and/or approval.

- 5. Proxy and Telephone Marriages. A proxy marriage is one in which agents or proxies act for one or both parties, during the marriage ceremony. A telephone marriage is a type of proxy marriage. Although such marriages have been held valid by the courts of several states, they will not be accepted as creating the relationship of husband and wife. The validity of such marriage is too doubtful under the decisions of the Comptroller General of the United States.
- a. If the parties to a proxy or telephone marriage subsequently live together, in a state of the United States, or in a country that recognizes common-law marriage, they may establish a valid common-law marriage.
- b. Pursuant to provisions of 37 U.S.C. 401, if a civil court of competent jurisdiction has found a proxy or telephone marriage to be valid, NAVMC Form 10922, must be forwarded to the CMC (MRP-1), for determination and/or approval.
- 6. <u>Void Marriage</u>. A marriage is valid only if both parties are legally qualified to contract a marriage. If one or both parties have another lawful living spouse, if closely related by blood, or if the parties leave their state or country to evade the marriage laws of their domicile, it is impossible for the parties to contract a valid marriage. Bigamy is prohibited.

7. <u>Voidable Marriage</u>. Many states and countries prohibit marriage because of underage, insanity, physical incapacity, certain diseases, fraud, duress, or mistake. Such marriages are null and void. They may be annulled, as determined by the laws of the various states and countries, upon petition of one of the parties. Such marriages require a decree of annulment and a complaint of annulment to affect their dissolution. A change in dependency because of an annulled marriage will be submitted to the CMC (MRP-1) for determination on the validity of the marriage and for validation of allowances received.

1002. DIVORCE

- 1. <u>United States Divorces</u>. When a Marine or the spouse has been previously married and the divorce was granted in the United States or its territories, NAVMC Form 10922 may be approved by the commanding officer for dependents not requiring a dependency determination by the CMC (MRP-1). Divorce decrees granted in the United States are usually effective to dissolve the marriage on the date the final decree is entered. Because laws of the states pertaining to the effective date of judgments vary, care must be exercised in determining the effective date of a final divorce decree. No subsequent marriage is valid unless the date of the final divorce is prior to the date of the subsequent marriage.
- 2. <u>Foreign Nation Divorce</u>. When a Marine or a spouse has been previously married and the divorce granted is from a foreign nation, NAVMC Form 10922 must be submitted to the CMC (MRP-1) for determination, with a copy of the English translation of the divorce decree attached.
- a. The following statement must then be made in the certification section of the NAVMC Form 10922: "I certify that validation of this marriage occurred at (NAME, COURT and LOCATION) on (DATE) as the basis for my entitlement to BAH as claimed and a copy of the validation papers are attached."

- c. Such additional information is required to determine the validity of a foreign divorce. Commanding officers should request competent legal review of any BAH application involving a foreign nation divorce prior to submission to the CMC (MRP-1) for determination. (NOTE: CMC (JA) provides legal advice and recommendations on applications for dependency benefits following a foreign divorce. Under reference (a), an application for dependency that involves remarriage of a servicemember following a foreign nation divorce is characterized as a case of 'doubtful relationship.' section provides that such a divorce may or may not be recognized as valid in the United States, depending on several factors, including place of residence of the parties involved, whether they appeared in person to obtain the divorce, and applicable state laws. The CMC (JA) has frequently determined that foreign divorces are of doubtful validity when a Marine applies for BAH as a result of a foreign divorce and a subsequent remarriage, unless one or both parties to the divorce were domiciled in the foreign country at the time of the divorce. The residence requirement stands even if the laws of such foreign country do not make residence or domicile a condition to it's court taking jurisdiction. Commanding officers should request legal assistance for the applicant before any dependency applications involving a foreign divorce are forwarded to the CMC (MRP-1) for determination and/or approval.)
- 3. <u>Support While Divorce Action Pending</u>. If a divorce action is pending between a Marine and their spouse, and no court order or mutual agreement in writing affecting the obligation of the Marine to support their spouse and child(ren) had been granted or entered into, the spouse and child(ren) will be considered to be eligible dependents.
- a. In the event that a Marine's support obligation is reduced pursuant to Chapter 15 of reference (b), the servicemember may lose BAH entitlement pursuant to reference (a).
- b. If a court order or written agreement indicates that a Marine is not obligated to support their spouse and child(ren), the Marine may terminate the dependent support.
- c. A provision in a court order, or written agreement, which qualifies the obligation of a Marine to support a lawful spouse, does not, in itself, affect the minimum support requirement for a child(ren).
- 4. <u>Interlocutory and Decree Nisi of Divorce</u>. In an action for divorce, an interlocutory decree, a decree nisi, nor a decree containing an interlocutory clause, terminate the relationship of husband and wife until a final decree has been entered or a stipulated period of time has passed. During this waiting period, the spouse of a Marine is still the lawful

spouse, and the same rules will be followed for spouses in this category as for spouses who are separated from a Marine by written agreements or court order.

1003. CHILDREN/WARDS

- 1. <u>Legitimate Children</u>. The CMC (MRP-1) must be notified immediately of any changes in status of a Marine's dependents. This notification will be made on the NAVMC Form 10922, which the Marine is responsible to institute, listing all the Marine's dependents. Upon the birth of a child, the commanding officer will approve the child as a dependent after viewing the records (i.e., birth certificate or the certificate issued by the hospital prior to receipt of the birth certificate). If a birth certificate is not immediately available, a statement issued by the hospital showing the Marine and spouse as the natural parents is considered sufficient documentation. (NOTE: In order to obtain medical coverage, a copy of the child's birth certificate or a certificate issued by the hospital, along with a copy of the marriage certificate, must be provided to the RAPIDS site for the child to be enrolled in DEERS and receive medical entitlements.)
- 2. Children Born Out of Wedlock. See chapter 2 of this Manual.
- 3. <u>Stepchildren</u>. A NAVMC Form 10922 for stepchildren may be approved by commanding officers, effective from the date of marriage or the date the stepchildren became dependent upon the stepparent, as described below, whichever is later.
- a. When the member is not the natural parent, stepchild(ren) must be dependent upon the Marine for more than 50 percent of their monthly support for BAH entitlement. If the child(ren) resides in the Marine's household, the Marine is eligible for travel and transportation allowances for the stepchild(ren). (Monies received on behalf of the stepchild(ren) from savings accounts, social security, and trust funds are considered income received for the stepchild(ren).)
- b. Commanding officers may approve a NAVMC Form 10922 for step-children after viewing: a notarized Children's Dependency Determination Affidavit Form, NAVMC Form 11346 (figure 1-1), completed by the child's custodian; a certified copy of the child's birth certificate; and the document that dissolved each prior marriage of the Marine and the spouse.
- 4. Adopted Children. A NAVMC Form 10922 for adopted children may be approved by commanding officers, effective from the date of adoption or the date the adopted children become dependent upon the adoptive parent, whichever is later.

- a. Adopted children must be dependent upon the Marine for more than 50 percent of their support (monies received on behalf of the adopted child from savings accounts, social security, and trust funds are considered income received for the adopted child).
- b. Commanding officers may approve a NAVMC Form 10922 for adopted children after viewing a notarized NAVMC Form 11346, (figure 1-1), completed by the child's custodian; a certified copy of the adoption decree; and a certified copy of the child's birth certificate.
- 5. <u>WARDS/PRE-ADOPTED CHILDREN</u>. A ward/pre-adopted child who is unmarried may be claimed for BAH, travel, and transportation allowances, effective the date of the court order for residence. The following criteria must be met:
- a. A court of competent jurisdiction, in the United States or Territory of the United States, has placed the person in the custody of the member either permanently or for a period not less than 12 months from the date of the order.
- b. The person must be either under 21 years of age, or at least 21 years of age, but under 23 years of age who meets the criteria for a student as stated in paragraph 1003.10; or incapable of self support because of a mental or physical incapacity that occurred while the person was considered a dependent ward of the member.
- c. The person must be dependent upon the member for over 50 percent of the person's support.
- d. The person must reside with the member unless separated by either the necessity of military service to receive institutional care as a result of disability or incapacitation, or under such other circumstances as the Secretary concerned may by regulation prescribe.
- e. The person may not be a dependent of any member under any other part of this definition.
- 6. Pre-Adopted Children. Pre-adopted children may be claimed for BAH, travel, and transportation allowances, effective the date of the court order. NAVMC Form 10922 may be approved at the command level, supported by documents from a U.S. civil court showing the Marine's intent to adopt the child(ren), and a NAVMC Form 11346 (figure 1-1).
- 7. <u>Child of Spouse</u>. When the Marine is not the natural parent, the child is considered a stepchild.

8. <u>Children Born Out of Wedlock</u>, with Subsequent Marriage of Their Natural Parents are Considered Legitimate Children

- a. NAVMC Form 10922 for dependent children legitimized by marriage of their parents may be approved from the date of the marriage.
- b. Commanding officers will view the child's birth certificate, the marriage certificate, and the documents dissolving any prior marriage of the Marine and spouse if applicable.
- 9. Incapacitated Children Who Are 21 Years of Age and Older. NAVMC Form 10922 for incapacitated children must be forwarded to the CMC (MRP-1) for a determination. Incapacitated children must be dependent upon the Marine for more than 50 percent of their support before the Marine will be eligible to receive BAH. When submitting NAVMC Form 10922, the following documents must be attached: a doctor's statement describing the incapacitation; the date the illness or injury commenced; the extent and probable duration; and a notarized NAVMC Form 11346 (figure 1-1), completed by the custodian. Annual review for dependency determination is required per ref (a).
- 10. <u>College Students</u>. Unmarried children from the age of 21 to the date of their 23rd birthday, enrolled in a full-time course of study in an institution of higher education, shall be considered eligible dependents for BAH when the Marine is providing more than 50 percent of his or her support. The institution shall be approved by the service Secretary concerned. When submitting a NAVMC Form 10922 to the CMC (MRP-1), the following documents must be attached: a letter from an institution of higher education stating full-time enrollment with expected date of graduation and a notarized NAVMC Form 11346 (figure 1-1).

1004. SUBMISSION AND FORWARDING OF THE DEPENDENCY APPLICATION, NAVMC FORM 10922

1. <u>Submission and Forwarding</u>. On each occasion when a dependent is gained or lost, notification must be made to the CMC. For dependency applications requiring the CMC approval, forward the completed dependency application to the CMC (MRP-1) for determination; retaining a copy in the Marine's service record book (SRB) or officer qualification record (OQR) pending return of the approved and/or disapproved dependency application. After a determination has been made, the CMC (MRP-1) will forward the original of the completed dependency application to the Marine's current command and forward a file copy to the Marine's official record. In those cases where the commanding officer has the authority to approve a dependency

application, forward a copy of the completed dependency application directly to the CMC (MMSB) for review and insertion in the Marine's official record, except for those dependency applications requiring CMC diary action. The original of the latest approved and/or disapproved dependency application shall remain in the Marine's SRB/OQR. Requests for copies of previously submitted dependency applications will be made to the CMC (MMSB).

- 2. <u>Missing Documentation</u>. BAH applications are not to be submitted without the supporting documentation required by this Manual. Any dependency applications submitted with missing or incomplete documentation will be disapproved and returned to the originating command. In extraordinary cases where the documentation cannot be obtained, the commanding officer or the representative should contact the CMC (MRP-1) for instructions.
- 1005. COMMANDANT OF THE MARINE CORPS DIARY ACTION. Unit diary actions for dependents requiring CMC approval/disapproval can only be accomplished by the CMC (MRP-1).
- 1006. CHECKLIST FOR THE SUBMISSION OF NAVMC FORM 10922. Figure 1-2 is a checklist for the types of dependency applications covered in this chapter. It should be used by those responsible for the preparation and review of applications prior to forwarding them to CMC (MRP-1). Those responsible for the delivery of recruits to the Marine Corps recruiting depots should use the checklist at figure 1-2 to ensure recruits with dependents have all required documentation with them when reporting to recruit training.
- 1007. SAMPLE FORMATS FOR SUBMITTING DEPENDENCY APPLICATIONS, NAVMC FORM 10922. Figures 1-3 through 1-16 are examples to be used as additional guides in the preparation of dependency applications.

MRP-1, 3280 Russell Road, C			,	and notarized, mai			
CHILD'S NAMI	E	DATE OF BIRT	Н	CHILD'S	NAME	ı	DATE OF BIRTH
			3.				
			4.				
Is the natural parent (other that	an vou or the Marin	a) a service membe		YES NO	ົ		
res, give name, social security Is/are child(ren) residing in the es, list the date residence beg	Marine's household	? TYES	N				
INCOME OF ABOVE CHILD (RE	N) ONLY		EXPE	NSES OF ABOVE C	HILD(REN) ONL	.Y	
ITEM	MONTHLY	YEARLY		ITEM	MONTHLY	YEARLY	
Wages or salary of			1. F	Rent (Pro Rate)			
child(ren)			2. F	Food (Pro Rate)			
			3. L	Itilities (Pro Rate)			
2. Income from property, stocks, bonds, invest-				Clothing			-
ments, savings or trust funds.			-	School Expenses			-
Support payments from				Medical			-
the natural parent (See NOTE below)				Dental Tiscellaneous ify)			_
Social security, VA, private pensions or insurance annuities							
E. If the child(ren) is/are illegithe questions pertain to the fu	unds provided by th	e natural parent o	MIDI	other than the Mar		. ,	J ward(s) of the co
SIGNATURE OF PHYSICAL C				(RELATIONSH	IPTO CHILD)		
				,	,		
Subscribed and duly sworn to 20	,	e according to law (or town) of	by the a		County of	da	ay of and State of -
	My co	ommission expires		(SIG	NATURE OF NO	OTARY)	

Figure 1-1. -- Sample NAVMC Form 11346, Children's Dependency Determination Affidavit.

YES	NO	CHECKLIST FOR THE SUBMISSION OF NAVMC FORM 10922
		Have all appropriate blocks on the NAVMC Form 10922 been completed as shown?
		Have all applicable documents been listed in the Certification Section of the NAVMC Form 10922?
		3. Have the documents been viewed and attached?
		4. For a dependent previously claimed on the NAVMC Form 10922 being submitted, does the Certification Section indicate that pertinent documents were previously viewed?
		5. Is a marriage certificate attached to the application? NOTE: A marriage license is not acceptable.
		6. Is effective date of each final divorce decree prior to the date of the marriage?
		7. If not, is there a determination document from the civil court attached that shows the marriage to be valid?
		8. Is this a divorce from a foreign nation?
		9. If so, is a copy of the determination from a civil court attached that shows the divorce is valid?
		10. Or that the Marine's marriage is valid?
		11. Is the statement required in paragraph 1002.2.b of MCO P1751.3, involving a foreign nation divorce, by either the officer or the spouse, contained in the certification section of the dependency application?
		12. Is a certified copy of each child's birth certificate attached?
		13. Has the Children's Dependency Determination Affidavit, NAVMC Form 11346, been completed by the physical custodian for the adopted child, stepchild, or child born out of wedlock?
		14. If a child born out of wedlock is involved and the Marine is not the natural parent, is a notarized statement attached? NOTE: The statement must be made and signed by the spouse, attesting to the number of times previously married and the date and manner of dissolution of each prior marriage. If not previously married, state so on the spouse's notarized statement.
		15. Has a certified copy of the adoption decree for adopted child(ren) been viewed?
		16. In ward cases, is a court order establishing guardianship for at least 12 consecutive months included?
		17. Is the parent/parent-in-law Dependency Statement, (DD Form 137-3, figure 3-1), completed and notarized and attached to the application? Has the fact that it has been cited been listed in the certification section of the application?
		18. Do all foreign nation documents have English translations attached?
		19. Have all the appropriate blocks on the affidavit form been completed?
		20. Is the affidavit form notarized, signed by a commissioned officer, or other official authorized to administer oaths?

Figure 1-2. -- Checklist for the Submission of NAVMC Form 10922.

NA' (Supobso	VMC 1 persedes plete an	0922 (R s all previ	PUCATION (1751 REV. 4-01) (EF) ous editions which a be used) 800		WHERE ADI	NSTRUCTION DITIONAL SPACE IS N TE ITEMS, USE SEPAF PPLICATION 20010609	NECESSARY T	0	REA			(CH CHAN	APPLICATIO ECK ONE) GE IN DEPEN (Check one HANGE IN DEPEN LOSS (EXPLAIN CERTIFICATION	NDENTS) NDENTS I IN	X	G
			E(Last, first, middle) ONZO DEAN		SS		700		GRAI	DE SGT	Т	YPE OF	SERVICE		1 116	SMCR
. z			AND STATION PREPAR	INC THIS A	DDI ICATIONI	123 45 6789 UNIT RUG				SGI	DATE	OE CUB	USMC RENT ENLISTME	NT/A PP∩IN		
SECTION 1.	1ST	BN 6TH	MARINES 2D MAR UNE NC 28547			ANT			DATE REPORTN LATER)					E DUTY (WI		
	FUTURE	ADDRESS	S AND ETA IF TRANSFE	RISANTICI	PATED WITH	IN 60 DAYS	ECC)40	612			OF LAST ACTIVE I	T DISCHARGE C DUTY	R DATE OF	LAST I	RELEASE
_	NO.		IE OF DEPENDENT ude full given name)			E ADDRESS Zip Code)		nild,				ATE OF BIRT	H CLAIN previo	ИED Fl uslyap	WANCE ROM (If proved, pproval)	
DEPENDENT INFORMATION	1	TONYA	CAROL MARINE	123 FO JACK	OURTH ST SONVILLE	E NC 28540		SPOUSE				07071977	2	00105	530	
DENT INF	2															
2 DEPEN	3															
SECTION 2	5															
	6															
ODIAN N	Furnish	the follow i	ing information concern	ing custodiar	n of any depe	ndent named above	e.									
SECTION 3 CUSTODIAN INFORMATION	DEP NO		FULL NAME OF CU	STODIAN		RELATION DEPENI						ADD	RESS AND ZIE	PCODE		
							HAVE YOU	DEE	N DDE	VIOLIS	DIV MA	DDIED?	HAS PRESE	NT SPOUSE	BEEN	
MATION	DATI		NFORMATION CONCER		GIVEN NAME		NO	BEE	YES	Г	SLY MA	NO OF	PREVIOUSL'			NO OF TIMES
IBER AND SPOUSE AND INFORMATION	2001053				CAROL G			ΑN	SWEF	RABO	OVEIS		GIVE INFORM		QUES	
OUSEAN	FO	MATION CO RMER NAGE OF	ONCERNING DISSOLU								OUSE	(Continu	1	sheet if ne		•
A AND SP TERNITY		SPOUSE	NAME OF THE SP THE DISSOLVED M		DATE OF DISSOLUTI		Place of (Coun						DEATH	ANNULN	IENT	DIVORCE
回译																
F SERVICI DING SUF																
TATUS OI REGAR															_	
MARITAL STATUS OF SERVICE N REGARDING SUPPC	IS THERE	E A COURT (ORDER OR WRITTEN A GRE	EMENT IN EFF	ECT RELATIVE	TO SUPPORT/MAINTE	ENANCE/PATI	ERNI	TY?					1		
SECTION 4 M		YES	IF YES, STATE DATE AN	D PLACE (cou	nty and state) V	VHERE SUCH ORDER/	/AGREEMENT	WA	s issu	IED AN	ND ATT	ACH A	COPY.			
	GINAL									Г	Desian	ed Usin	g FormFlow 2.	22, HQMC	/ARSI	E, Apr 01

Figure 1-3a - Sample Format for a Marine Who Marries, No Children or Previous Marriages Involved.

NAV	/MC 10922 (Rev. 4-01) (EF) Page 2			NAME OF MARINE (Last, firs MARINE, ALONZO D	
P DESTRUCTOR	HAS NATURAL PARENT OTHER THAN CLAIMANT OF CHI	ILD(REN) LISTED EVER BE	EEN A MEMBER OF AN	Y U.S. ARMED FORCES?	
TAIRAP ART 5 ZOFCING	YES I F YES, LIST ALL AVAILABLE IDENTIFY service, inclusive dates of active service,		· ·	SSN, grade, type of service	, branch of
WITHOUT DIRECT Z PARENTS PARENTS	HAS YOUR SPOUSE EVER BEEN A MEMBER OF ANY U.S. NO	. ARMED FORCES?			
PA N	YES. IF YES, COMPLETE THE BLOCKS BELOW				
000	SSN GRADE TYPE OF SERVICE E	BRANCH OF SERVICE	INCLUSIVE DATE	ES OF ACTIVE SERVICE	ВАН
00 ZOF-CIII0	REGULAR				WITH DEPENDENTS WITHOUT DEPENDENTS BAH DIFF
5 P	I CERTIFY that all the above statements are true to knowledge and belief, and I consent to checkage any allowances paid on laws and regulations. I winform my commanding officer of any change in to status of my dependents, whether it be the gain of dependents, or the loss of dependents.	d as a result of the proc claimed dependents or	essing/adjudication of this custodians thereof, to the ion of benefits, entitlements by dependents.		
めたくのままます 7 ありまくいの		23 45 6789	SGT		
NO II CIES	(Signature of M: Subscribed and sworn before me this 10 day of	June 01		ecurity Number)	(Grade)
	Document Viewed (List and attach all	documents viewed)	TEWART, CWO2, US	e of attesting officer) MC,PERSO of attesting officer)
	FOR USE BY COMMAND APPROVING AUTHORITY:	FOR USE BY UNIT DIAR	RY CLERK:		Y CMC APPROVING AUTHORITY:
	APPROVED AS APPROVED AS CLAIMED CLAIMED CLAIMED CLAIMED CLAIMED FORWARDED TO CMC (CODE MRP-1) FOR APPROVAL FOR DEPENDENT NUMBERS	REPORTED ON UNIT DIA	ARY:		
	APPROVED FOR DEPENDENT NUMBERS:	NO			
X-BOH-DA GN.X	APPROVED FOR CHILD BORN	RUC			
	OUT OF WEDLOCK FOR DEERS ELIGIBILITY PER MCO P5512.11. CHECK ONE CHILD	ENTRIES REPORTED:			
DANCE & NOTICEN	RESIDES IN COURT MEMBER'S ORDER (Recertify annually) No Court Order	(Ensure the p	proper diary action	on taken	
	(Signature of commanding officer)				
	JOHN A. MAY, MAJOR (Typed name and grade of commanding officer)				
	1STBN 6THMAR 2DMARDIV FMFLANT (Unit Designation)				
OBI	GINAL	1		Designed Using For	mFlow 2.22, HQMC/ARSE, May 01

Figure 1-3b - Sample Format for a Marine Who Marries, No Children or Previous Marriages Involved.

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NAV (Sup	/MC 10 ersedes lete and	922 (R all previ	PUCATION (1751) EV. 4-01) (EF) ous editions which a be used) 300		WHERE AD	DITIONAL S TE ITEMS, U	USE SEPARA	CESSARY TO	RE	ASON		(CH CHAN	APPLICATION HECK ONE) IGE IN DEPEN (Check one)	DENTS		G
						200	10609		X	ST	ART	C	HANGE IN DEPEN LOSS (EXPLAIN CERTIFICATION	IN	X	GAIN
			E (Last, first, middle)		ss		10007		GRA	ADE	TY	PE OF	SERVICE			
. 2			ONZO DEAN			12	23 45 678			SGT	DATE	X	USMC	IT/A DDON'T		MCR
SECTION 1.	1ST I	3N 6TH	AND STATION PREPARI MARINES 2D MAR JNE NC 28547					UNIT F	uc 2160)		REPOR	TING FOR ACTIVE	ENT ENLISTMENT/APPOINTMENT OR NG FOR ACTIVE DUTY (WHICHEVER IS 000613		
z	FUTURE	ADDRESS	AND ETA IF TRANSFE	RISANTICI	PATED WITH	IIN 60 DA	YS	ECC 04	0612			OF LAS	T DISCHARGE OF DUTY	R DATE OF L	AST R	ELEASE
-	NO.		E OF DEPENDENT ude full given name)		COMPLET (Include	E ADDRES Zip Code)	SS		I (If child, indicate step, adopted, I				OATE OF BIRTH (Day, Mo., Year)	DATE A CLAIM previou give dat	sly app	roved,
DEPENDENT INFORMATION	1 7	TONYA	CAROL MARINE		OURTH ST Sonvilli		3540	SPOUSE				07071977	20	0105	30	
N FN	2											_				
PENDE	3															
	4															
SECTION 2	5															
	6															
ODIAN	Furnish t	he follow i	ng information concerni	ng cus todian	of any depe	ndent nan	ned above.									
SECTION 3 CUSTODIAN INFORMATION	DEP NO		FULL NAME OF CU	STODIAN	N RELATIONSHIF DEPENDENT							ADD	RESS AND ZIP	CODE		
SECTIO																
ATION		IN	NFORMATION CONCER	NING PRESE	NT MARRIA	GE		HAVE YOU B			SLY MAF	RRIED? NO OF		MARRIED?	EEN	NO OF
NFORM,	DATE	PLAC	E (County and State)	FULL (GIVEN NAME	OF SPOU		NO [<u>`</u>	ES L	1	TIMES	, GIVE INFORM	YES	1	TIMES
AND	2001 0530		O NV ONCERNING DISSOLU		CAROL G			BELOW.								
ouse	FOF	MER AGE OF	NAME OF THE SPO		DATEOF						,			SON (Che		
AND SI	YOUR-	SPOUSE	THE DISSOLVED M		DISSOLUTI			Place of d (County					DEATH	ANNULM	ENT [DIVORCE
M BMBER ORT/PAT	SELF		HEATHER FAY I	MARINE	2000031	11 MO	ONTERE	Y CA								×
SERVICE SING SUFF		X JUSTIN DAVID GRAY			2000050	06 MC	ONTERE	Y CA								×
TATUS OF REGARD																
N 4 MARITAL STATUS OF SERVICE MEMBER AND SPOUSE AND INFORMATION RESARDING SUIPORT/PATERNITY	IS THERE A COURT ORDER OR WRITTEN AGREEMENT IN EFFECT RELATIVE TO SUPPO NO YES IF YES, STATE DATE AND PLACE (county and state) WHERE SUC									SUED AI	ND ATT/	ACH A	COPY.			
SECTION																

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Figure 1-4a - Sample Format for a Marine Who Marries and Previous Marriages are Involved with No Children.

NAV	VMC 10922 (Rev	/. 4-01 <u>]</u>) (EF) Page 2			NAME OF MARINE (La MARINE, ALONZ	st, first, middle) O DEAN					
AL PARENT OF ED FO RCES	NO NO			OF CHILD(REN) LISTED EVI								
SECTION 5 NATURAL PARENT CHILD IN ARMED FORCES				ITIFYING INFORMATION (F		arent, SSN, grade, type	of service, branch of					
ECTION 6 SPOUSE IN ARMED FORCES	X NO		N A MEMBER OF AN'	Y U.S. ARMED FORCES?								
USEIN	SSN GRADE TYPE OF SERVICE BRANCH OF SERVICE INCLUSIVE DATES OF ACTIVE SERVICE BAH											
6 SPO							WITH DEPENDENTS					
SECTION			RESERVE				WITHOUT DEPENDENTS BAH DIFF					
CERTIFICATION	any allowances paid on laws and regulations. I will immediately application, to my claimed de						processing/adjudication of this ts or custodians thereof, to the dication of benefits, entitlements					
7 CERTI		SGT										
SECTION 7	Subscribed and sworn		(Signature of			Security Number)	(Grade)					
	before me this		10 day of	June 0		(Signature and	Title of attesting officer)					
	Document '	View ed	(List and attac	h all documents view	ved) T. J. ST	EWART, CWO2, U	-					
	FOR USE BY COMMAND	APPROVIN	`	FOR USE BY UNIT DIARY			ade of attesting officer) SE BY CMC APPROVING AUTHORITY:					
	APPROVED AS CLAIMED		FORWARDED TO CMC (CODE MRP-1) FOR APPROVAL FOR DEPENDENT NUMBERS	REPORTED ON UNIT D		1.51.55						
	APPROVED FOR DEPENDENT	-		No								
Ĕ	NUMBERS:	_		DATED								
G А ШТНОВІТУ	APPROVED FO OUT OF WEDL ELIGIBILITY PEI	OCK FOR D		RUC								
	P5512.11. CH			ENTRIES REPORTED:								
APPROVIN	CHILD RESIDES IN MEMBER'S	Γ	COURT	(Ensure the pro	per diary action	taken						
SECTION 8	HOUSEHOLD (Recertify annu No Court Orde	ually) er		101001404)								
S	(Signature o	of comma	nding officer)	_								
	JOHN A. MAY, (Typed name and		ommanding officer)	_								
		R 2DMA t Designat	RDIV FMFLANT	_								

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Figure 1-4b - Sample Format for a Marine Who Marries and Previous Marriages are Involved with No Children.

NA (Su obs	VMC persed olete	109 les all and w	22 (Ri previo	PLICATION (1751) EV. 4-01) (EF) bus editions which a be used) 100		WHERE AD	INSTRUCTIO DITIONAL SPACE IS ETE ITEMS, USE SEP APPLICATION	NECES		REASON FOR THIS APPLICATION (CHECK ONE) CHANGE IN DEPENDENTS (Check one) CHANGE IN DEPENDENTS (Check one) CHANGE IN DEPENDENTS LOSS (EXPLAIN IN							G	
							20010609			\times	STA	ART		CERTIFICATI			\times	GAIN
				(Last, first, middle)		SS		6700					SERVICE			110	MCD	
	_			NZO DEAN IND STATION PREPARI	ING THIS AF	PPLICATION	123 45 0	6/89	UNIT RU		J1	DATE	OF CUI	USMC RENT ENLISTI	MENT/	/APPOINT		OR OR
	1S'	T BN	6TH	MARINES 2D MAR JNE NC 28547		FMFLANT				12160 DATE REPOR			REPOR	RTING FOR ACTIVE DUTY (WHICHEVER IS 000613				
	FUTU	READ	DRESS	AND ETA IF TRANSFE	RISANTICI	PATED WITH	HIN 60 DAYS		ECC 040	DATE OF LAST TO INACTIVE D			T DISCHARGE			AST F	RELEASE	
	NO.			E OF DEPENDENT de full given name)		COMPLETE ADDRESS (Include Zip Code)							DATE OF BIR (Day, Mo., Ye	TH	DATE A CLAIM previously date	ED FR	OM 41 ved give	
	1	то	NYA	CAROL MARINE		OURTH ST	E NC 28540			SPOU	JSE			07071977	7		v apj 0105	
	2	JII	LL EL	ISE MARINE	SAME	AS ABOV	/E		D	AUGI	нті	ΞR		08062000)	20	0105	30
	3																	
	5																	
	6																	
	Furnis	sh the	follow in	ng information concerni	ng custodian	n of any depe	endent named abo	ove.										
	DEP NO			FULL NAME OF CU	STODIAN		RELATIC DEPE	NSHIP NDENT	то				ADE	RESS AND 2	SS AND ZIP CODE			
	2	TO	NYA	CAROL MARINE			MO	THER	-	SA	ME	AS A	ABOV	Е				
			IN	FORMATION CONCER	NING PRESE	NT MARRIA	GE	HAV	E YOU BEE	N PREV	IOUS	SLY MA	RRIED?	HAS PRES			EEN	
	DA	TE	PLACI	E (County and State)	FULL (GIVEN NAM	E OF SPOUSE	X	NO _	YES	L		NO OF	' X NO			NO OF TIMES	
	20010			0 NV		CAROL (BEL	OW.					, GIVE INFO				
	MA	FORME RRIAGI Check o	R E OF	NAME OF THE SP		DATEO			lace of dis			OUSE	(Contir	1		ON (Che		
	YOU SEL	R- s	POUSE	THE DISSOLVED M	ARRIAGE	DISSOLUT	TION		(County an	d State)				DEATH		NNULM	ENT I	DIVORCE
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	IS THE	NO)	RDER OR WRITTEN AGRE										COPY.	2 22	ПОВАС	A DOS	Apr 04

Figure 1-5a - Sample Format for a Marine Who Is Married and Acquires a Child by Birth.

NA۱	VMC 10922 (Rev. 4-01) (EF) Page 2		Ī	NAME OF MARINE (Last, firs MARINE, ALONZO DE	t, middle) AN
ARENT OF DRCES	HAS NATURAL PARENT OTHER THAN CLAIMANT OF NO	CHILD(REN) LISTED EVI	er been a member o	FANY U.S. ARMED FORCES	3?
SECTION 5 NATURAL PARENT CHILD IN ARMED FORCES	YES IF YES, LIST ALL AVAILABLE IDENT II service, inclusive dates of active service.			rent, SSN, grade, type of sen	rice, branch of
ARMED FORCES	HAS YOUR SPOUSE EVER BEEN A MEMBER OF ANY U NO YES. IF YES, COMPLETE THE BLOCKS BELO'				
SEIN		BRANCH OF SERVICE	INCLUSIVEDAT	ES OF ACTIVE SERVICE	ВАН
SECTION 6 SPOUSE IN ARMED FORCES	REGULAR RESERVE		INGEGGIVE BALL	ES G NOTIVE SERVICE	WITH DEPENDENTS WITHOUT DEPENDENTS BAH DIFF
SECTION 7 CERTIFICATION	I CERTIFY that all the above statements are true knowledge and belief, and I consent to checkage any allowances paid on laws and regulations. I winform my commanding officer of any change in status of my dependents, whether it be the gain dependents, or the loss of dependents.	against my pay for will immediately the number and/or	hereon or obtained application, to my extent necessary	claimed dependents or o	essing/adjudication of this custodians thereof, to the on of benefits, entitlements
CERTIF			12	3 45 6789	SGT
) V	(Signature of M	larine)		ecurity Number)	(Grade)
SECTIC	Subscribed and sworn 10 day of	June 0	1	(Cinnellon and Title of	The skins of the s
	Document Viewed (List and attach all	documents viewed	1)T. J. ST	(Signature and Title of TEWART, CWO2, USM	-
				(Type Name grade of	
	FOR USE BY COMMAND APPROVING AUTHORITY: FORWARDED TO CMC (CODE MRP-1) FOR APPROVAL FOR APPROVAL FOR DEPENDENT NUMBERS	FOR USE BY UNIT DIARY REPORTED ON UNIT D		FOR USE BY C	MC APPROVING AUTHORITY:
	APPROVED FOR DEPENDENT NUMBERS:	NO			
AUTHORITY	APPROVED FOR CHILD BORN OUT OF WEDLOCK FOR DEERS	RUC			
<u>N</u>	ELIGIBILITY PER MCO P5512.11. CHECK ONE	ENTRIES REPORTED:			
SECTION 8 APPROV	CHILD PESIDES IN MEMBER'S HOUSEHOLD (Recertify annually) No Court Order	(Ensure the pro- is recorded)	pper diary action	taken	
R	(Cinceture of a grand distribution)				
	(Signature of commanding officer)				
	JOHN A. MAY, MAJOR (Typed name and grade of commanding officer)				
	1STBN 6THMAR 2DMARDIV FMFLANT				
	(Unit Designation)				
OBIO	GINAL	I .		Designed Using Form	nFlow 2.22, HQMC/ARSE, May 01

Figure 1-5b - Sample Format for a Marine Who Is Married and Acquires a Child by Birth.

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NA\ (Sup	EPENDENCY APPLICATION (1751) AVMC 10922 (REV. 4-01) (EF) upersedes all previous editions which are solete and will not be used)						DDITIO	STRUCTION ONAL SPACE IS N TEMS, USE SEPAR	ECESS		REASON FOR THIS APPLICATION (CHECK ONE) CHANGE IN DEPENDENTS						G	
			vill not 984-98	,		DATE OF	APPL	ICATION			Š		I		(Check one)			
						20010609				X	ST	ART		LOSS (EXPLAIN CERTIFICATION	IN	K GAIN		
				E(Last, first, middle) ONZO DEAN		SSN 123 45 6789				GRAI	DE SGT	T,	YPE OF	SERVICE		USMCR		
SECTION 1.	1S	T BN	6TH	AND STATION PREPARI MARINES 2D MAR JNE NC 28547			1	UNIT RU						OF CU REPOR	RRENT ENLISTMENT/APPOINTMENT OR ITING FOR ACTIVE DUTY (WHICHEVER IS			
S E				AND ETA IF TRANSFE	RISANTICI	PATED WIT	THIN (60 DAYS						OF LAS	ST DISCHARGE O	000613 T DISCHARGE OR DATE OF LAST RELEASE DUTY		
	NO.			E OF DEPENDENT ude full given name)			COMPLETE ADDRESS REL.			ilia, indicate step, adopted. I			ea,	DATE OF BIRTH (Day, Mo., Year)	previously	OWANCE FROM (If approved, of approval)		
RMATION	1	TC	NYA	CAROL MARINE		123 FOURTH ST JACKSONVILLE NC 28540			SPOUSE			07071977 200		10530				
DEPENDENT INFORMATION	2	JILL ELISE MARINE			SAME	AS ABO	SABOVE			Б	DAUGHTER			08062000	200	10530		
2 DEPEN	4																	
SECTION 2	5																	
	6	3																
DDIAN	Furnish the following information concerning custodian of any dependent named above.																	
SECTION 3 CUSTODIAN INFORMATION	DEP NO					RELATIONSHIP TO DEPENDENT			то				ADE	DRESS AND ZIF	CODE			
SECTION	2	Т	ONYA	CAROL MARINE				MOTHER			SAME AS ABOVE				'E			
NOI			, IN	FORMATION CONCER	NING PRESE	NT MARRI	AGE		HAV	E YOU BEE	EEN PREVIOUSLY MARRIED?				PREVIOUSLY	IT SPOUSE BEE 'MARRIED?		
ORMA	DA	TE	PLAC	E (County and State)	FULL (GIVEN NAME OF SPOUSE			NO YES NO OF TIMES					II X I NO I	NO OF TIMES			
NDV	20010		1	NO NV		CAROL			BEL	OW.					, GIVE INFORM			
OUSE,	MA	FORMI RRIAG	ER E OF	NAME OF THE SP		DATE		RRIAGE OF BOT					-003E	COILLI	1	ASON (Check		
BER AND SPOUSE AND INFORMATION PATERNITY	YOU! SEL		one) SPOUSE	THE DISSOLVED M		DISSOLU				lace of dis					DEATH	ANNULMEN	T DIVORCE	
M BV	ok																	
SERVICE ING SUP																		
MARITAL STATUS OF SERVICE I REGARDING SUPP																		
RITAL SI	IS THERE A COURT ORDER OR WRITTEN AGREEMENT IN EFFECT RELATIVE TO SUPPORTA							SUPPORT/MAINTE	NANC	E/PATERNI	ITY?							
4 MAR		X NO																
SECTION		YES IF YES, STATE DATE AND PLACE (county and state) WHERE SUCH OR							AGRE	-MENT WA	S ISSU	ED AI	ND ATT	ACH A	COPY.			

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Figure 1-6a - Sample Format for Dependent Children Legitimized by Marriage.

NAV	/MC 10922 (Rev	/. 4-0 1)	(EF) Page 2			MARINE, AL			lle)			
P.	HAS NATURAL PARE	NT OTHE	R THAN CLAIMANT C	F CHILD(REN) LISTED EV	ER BEEN A MEMBER	OF ANY U.S. AR	MED FORCES?	?				
ENT O	NO NO											
PAR												
SECTION 5 NATURAL PARENT CHILD IN ARMED FORCES				FIFYING INFORMATION (I		arent, SSN, grade	, type of servi	ice, br	anch of			
-83												
ORCE		EVER BEE	N A MEMBER OF ANY	U.S. ARMED FORCES?								
Ē	X NO											
A R	YES. IF YES, COMPLETE THE BLOCKS BELOW.											
6 SPOUSE IN ARMED FORC	SSN	GRADE	TYPE OF SERVICE	BRANCH OF SERVICE	INCLUSIVEDA	TES OF ACTIVES	SERVICE		BAH			
s SPO								\Box	WITH DEPENDENTS			
ECTION			REGULAR						WITHOUT DEPENDENTS			
S S			RESERVE						BAH DIFF			
CERTIFICATION	I CERTIFY that all the knowledge and belie any allowances paid inform my command status of my dependents, or the	ef, and I d on laws ding offic dents, wh	consent to checkages and regulations. If the contract of any change in the gain the gain the gain and the gain	ge against my pay for will immediately not the number and/or	gainst my pay for immediately enumber and/or hereon or obtained as a result of the processing/adjudication application, to my claimed dependents or custodians thereo extent necessary for the proper adjudication of benefits, en							
					1	23 45 6789			SGT			
SECTION 7	_		(Signature of	Marine)	(Social	Security Number)			(Grade)			
SECT	Subscribed and sworm 10 day of June 01											
	before me this		day of	June 0		(Signatur	re and Title of a	ttestin	a officer)			
	Document Viewed (List and attach all documents viewed) T. J. STEWART, CWO2, USMC, PERSO											
		(,	ii documents viewe	a)	(Type N	ame grade of at	ttesting	officer)			
	FOR USE BY COMMAND	APPROVING	G AUTHORITY: FORWARDED TO CMC	FOR USE BY UNIT DIARY	CLERK:	F	FOR USE BY CM	IC API	PROVING AUTHORITY:			
	APPROVED AS CLAIMED		(CODE MRP-1) FOR APPROVAL FOR	REPORTED ON UNIT I	DIARY:							
			DEPENDENT NUMBERS	NO								
	APPROVED FOR DEPENDENT NUMBERS:	-		- NO. ————								
	NOMBERS.			DATED								
AUTHORITY		_										
AGH.	APPROVED FO OUT OF WEDLO			RUC								
NG NG	ELIGIBILITY PER P5512.11. CH			ENTRIES REPORTED:								
APPROV	CHILD RESIDES IN			(Ensure the pro	per diary action	taken						
∞	MEMBER'S HOUSEHOLD		COURT ORDER	is recorded)	, , , , , , , , , , , , , , , , , , ,							
SECTION	(Recertify annu No Court Orde	ıally) r										
SEC												
	(Signature o	of commar	nding officer)									
	JOHN A. MAY,			_								
	(Typed name and g	grade of c	ommanding officer)									
			RDIV FMFLANT	_								
	(Unit	t Designat	ion)									

Figure 1-6b - Sample Format for Dependent Children Legitimized by Marriage.

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NA' (Sup	EPENDENCY APPLICATION (1751) AVMC 10922 (REV. 4-01) (EF) upersedes all previous editions which are solete and will not be used) i: 0109-LF-984-9800					WHERE ADD	NSTRUCTION ITIONAL SPACE IS N E ITEMS, USE SEPAR	IECESSARY TO	REASON FOR THIS APPLICATION (CHECK ONE) CHANGE IN DEPENDENTS						
				,		DATE OF AF	PLICATION					(Check one) ANGE IN DEPEN			
							20010609		CENTIFICATION SECTION					GAIN	
				E(Last, first, middle) NZO DEAN		123 45 6789			GRADE SGT			SERVICE USMC		USMCR	
SECTION 1. NTIFICATION	1S7	ΓΒΝ	6TH	AND STATION PREPAR MARINES 2D MAR JNE NC 28547				UNIT RU				RENT ENLISTMENT/APPOINTMENT OR FING FOR ACTIVE DUTY (WHICHEVER IS 000613			
S F	FUTUI	RE A D	DDRESS	AND ETA IF TRANSFE	RISANTICI	PATED WITHII	ED WITHIN 60 DAYS ECC 0400			TO INACTIVE D			DISCHARGE OR DATE OF LAST RELEASE		
_	NO.			E OF DEPENDENT ude full given name)		COMPLETE ADDRESS (Include Zip Code)			I (IT CHIID, INDICATE STED, ADODTED, I			DATE OF BIRTH CLAIR		LLOWANCE D FROM (If ly approved, of approval)	
DEPENDENT IN FORMATION	1	ТО	NYA	CAROL MARINE		OURTH ST KSONVILLE NC 28540			SPOUSI	Е		07071977	200	010530	
DENT INF	2														
	3														
SECTION 2	5														
Ø	6														
DIAN	Furnish the follow ing information concerning custodian of any dependent named above.														
SECTION 3 CUSTODIAN INFORMATION	DEP NO			FULL NAME OF CU	STODIAN	RELATIONSHIP TO DEPENDENT					ADDF	RESS AND ZIP	CODE		
SECTION															
_			IN	IFORMATION CONCER	NING PRESE	ENT MARRIAGE HAVE			VE YOU BEEN PREVIOUSLY MARRIED?			PREVIOUSLY MARRIED?			
ORMAT	DA	TE	PLAC	E (County and State)	FULL (GIVEN NAME	OF SPOUSE	X NO	YES		NO OF TIMES	NO [YES	NO OF TIMES	
ANDIN	2001 0:			NCUN, MEXICO		CAROL GI		BELOW.				GIVE INFORM			
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M EMBER AND SPOUSE AND INFORMATION PORT/PATERNITY	YOUF SELF		POUSE	THE DISSOLVED N	ARRIAGE	DISSOLUTIO	JN	(County a	nd State)			DEATH	ANNULME	NT DIVORCE	
ICE M BM UPPORT/		+													
OF SERV RDING S		+													
MARITAL STATUS OF SERVICE REGARDING SUP		+													
A ARITAL	IS THERE A COURT ORDER OR WRITTEN AGREEMENT IN EFFECT RELATIVE TO SUPPORT/MAINTENANCE/PATERNITY? NO														
4		_] YI		IF YES, STATE DATE AN	D PLACE (cour	nty and state) W	HERE SUCH ORDER/	AGREEMENT W	AS ISSUED A	ND ATT	TACH A C	OPY.			
SECTION	GINAI									Design	ed Heinn	FormFlow 2.2	2 HOMC//	ARSE Apr 01	

Figure 1-7a - Sample Format for a Foreign Marriage.

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NA۱	/MC 10922 (Rev	v. 4-01)) (EF) Page 2			MARINE, ALONZO						
ь Б		NT OTHER	R THAN CLAIMANT	OF CHILD(REN) LISTED EV	ER BEEN A MEMBER	OF ANY U.S. ARMED FO	ORCES?					
PARENT ORCES	NO NO											
SECTION 5 NATURAL PARENT CHILD IN ARMED FORCES				NTIFYING INFORMATION (I		arent, SSN, grade, type o	of service, branch of					
ECTION 6 SPOUSE IN ARMED FORCES	HAS YOUR SPOUSE I	EVER BEE	N A MEMBER OF AN	IY U.S. ARMED FORCES?								
IN ARM	YES. IF YES, COMPLETE THE BLOCKS BELOW.											
OUSE	SSN GRADE TYPE OF SERVICE			BRANCH OF SERVICE	INCLUSIVEDA	TES OF ACTIVE SERVIC	Е ВАН					
6 SP			REGULAR				WITH DEPENDENTS					
SECTION			RESERVE				WITHOUT DEPENDENTS BAH DIFF					
SECTION 7 CERTIFICATION	I CERTIFY that all the knowledge and belie any allowances paid inform my command status of my dependents, or the least the command of the com	ze release of any information processing/adjudication of this s or custodians thereof, to the lication of benefits, entitlements ort my dependents.										
CERTI					1	23 45 6789	SGT					
TION 7			(Signature of	of Marine)	(Social	Security Number)	(Grade)					
SEC	Subscribed and sworn 10 day of June 01											
	(Signature and Title of attesting officer)											
	Document Viewed (List and attach all documents viewed) T. J. STEWART, CWO2, USMC, PERSO (Type Name grade of attesting officer)											
	FOR USE BY COMMAND	APPROVING	G AUTHORITY:	FOR USE BY UNIT DIARY	CLERK:		E BY CMC APPROVING AUTHORITY:					
	APPROVED AS CLAIMED		FORWARDED TO CMO (CODE MRP-1) FOR APPROVAL FOR DEPENDENT NUMBER	REPORTED ON UNIT E	DIARY:							
	APPROVED FOR DEPENDENT	-		NO								
È	NUMBERS:	_		DATED								
AUTHORITY	APPROVED FO			RUC								
APPROVING	ELIGIBILITY PER P5512.11. CH			ENTRIES REPORTED:								
	CHILD RESIDES IN MEMBER'S	Γ	COURT									
SECTION 8	HOUSEHOLD (Recertify annu No Court Order	ally)										
SB	(Signature o	f commar	nding officer)	_								
	JOHN A. MAY,		ommanding officer)									
		R 2DMA Designat	RDIV FMFLANT									

ORIGINA

Designed Using FormFlow 2.22, HQMC/ARSE, May 01

Figure 1-8b - Sample Format for a Foreign Marriage.

/MC eræde lete a	ENDENCY APPLICATION (1751) MC 10922 (REV. 4-01) (日) resedes all previous editions which are ete and will not be used) 0109-LF-984-9800					WHERE ADDITIONAL SPACE IS NECESSARY TO COMPLETE ITEMS, USE SEPARATE SHEET DATE OF APPLICATION				REASON FOR THIS APPLICATION (CHECK ONE) CHANGE IN DEPENDENTS (Check one) CHANGE IN DEPENDENTS (CHECK ONE) LOSS (EXPLAIN IN					
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			(Last, first, middle) NZO DEAN		33	123 45 6	789		SGT		X	USMC] U	SMCR
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FUTUF	READI	RESS	AND ETA IF TRANSFE	R IS ANTICI	IPATED WITHIN 60 DAYS			ECC 040	DATE OF LAST TO INACTIVE D			ST DISCHARGE	T DISCHARGE OR DATE OF LAST RELEASE		
NO.			OF DEPENDENT de full given name)		COMPLETE ADDRESS (Include Zip Code)			RELATIONSHIP DA			DATE OF BIRT (Day, Mo., Year	H CLAIM previous	IED FI	WANCE ROM 01 oved give rovel)	
1	TON	IYA (CAROL MARINE	123 FO JACK	OURTH ST KSONVILLE NC 28540			SPOUSE			07071977	20	0010	530	
2															
3															
4															
5															
6															
Furnis	h the f	ollow in	g information concern	ing cus todiar	n of any depe	ndent named abov	e.						·		
DEP NO			FULL NAME OF CU	STODIAN	N RELATIONSHIP TO DEPENDENT			TO ADD			DDRESS AND ZIP CODE				
		INI	FORMATION CONCER	NING PRESE	NT MARRIA	GE .	HAV	VE YOU BEEN PREVIOUS		NO OF TIMES		PREVIOUSI	NT SPOUSE Y MARRIED?] NO OF
DA	TE	PLACE	(County and State)	FULL (GIVEN NAME	OF SPOUSE	X	NO	NO			YES		TIMES	
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YOUR SELF	}- _{SP}	OUSE	THE DISSOLVED M	IARRIAGE	DISSOLUTI	ON		(County an	d State)			DEATH	ANNULM	IENT	DIVORCE
IS THEI	NO YES		RDER OR WRITTEN AGRE									COPY.	22 1101/2	VA DO	- An-0:

Figure 1-8a - Sample Format for a Tribunal Marriage.

NA۱	/MC 10922 (Rev. 4-01) (EF) Page 2			NE, ALONZO DE								
ų.	HAS NATURAL PARENT OTHER THAN CLAIMANT OF	CHILD(REN) LISTED EVE	ER BEEN A MEMBER OF ANY U	J.S. ARMED FORCES	6?							
ENT O	NO											
SECTION 5 NATURAL PARENT OF CHILD IN ARMED FORCES	JES IF YES, LIST ALL AVAILABLE IDENTI	FYING INFORMATION (F	Full name of natural parent. SSN	N. grade. type of sen	vice, branch of							
NATI IN AR	YES service, inclusive dates of active servi			, 5 , , ,								
TION 5												
SECT												
CES	HAS YOUR SPOUSE EVER BEEN A MEMBER OF ANY U	J.S. ARMED FORCES?										
D FOR	X NO											
ECTION 6 SPOUSE IN ARMED FORCES	YES. IF YES, COMPLETE THE BLOCKS BELOW.											
JSEIN	SSN GRADE TYPE OF SERVICE E	BRANCH OF SERVICE	INCLUSIVE DATES OF A	CTIVESERVICE	ВАН							
s spoi					WITH DEPENDENTS							
NOIT					WITHOUT DEPENDENTS							
S	RESERVE		BAH DIFF									
	I CERTIFY that all the above statements are true knowledge and belief, and I consent to checkage		ease of any information essing/adjudication of this									
	any allowances paid on laws and regulations. I v inform my commanding officer of any change in	ed dependents or o	custodians thereof, to the on of benefits, entitlements									
N O	status of my dependents, whether it be the gain	tion to support my										
ICATI	dependents, or the loss of dependents.											
CERTIFICATION			123 45 67	789	SGT							
NO 7	(Signature of M	farine)	(Social Security N		(Grade)							
SECTION 7	Subscribed and sworn 10 day of June 01											
	before me this day of	June 0		(Signature and Title of	attesting officer)							
	Document Viewed (List and attach all documents viewed) T. J. STEWART, CWO2, USMC, PERSO											
	FOR USE BY COMMAND APPROVING AUTHORITY:	FOR USE BY UNIT DIARY	CLERK:	(Type Name grade of a	attesting officer) CMC APPROVING AUTHORITY:							
	FORWARDED TO CMC APPROVED AS (CODE MRP-1) FOR	REPORTED ON UNIT D	IARY:									
	CLAIMED APPROVAL FOR DEPENDENT NUMBERS											
	APPROVED FOR 1 DEPENDENT	NO										
	NUMBERS:	DATED										
ORITY												
АОТНОВТ	APPROVED FOR CHILD BORN OUT OF WEDLOCK FOR DEERS	RUC										
S G	ELIGIBILITY PER MCO P5512.11. CHECK ONE	ENTRIES REPORTED:										
APPROVI	CHILD RESIDES IN COURT											
∞	MEMBER S HOUSEHOLD (Recertify annually)											
SECTION	No Court Order											
S	(Signature of commanding officer)											
	JOHN A. MAY, MAJOR											
	(Typed name and grade of commanding officer)	-										
	1STBN 6THMAR 2DMARDIV FMFLANT											
	(Unit Designation)											

ORIGINA

Designed Using FormFlow 2.22, HQMC/ARSE, May 01

Figure 1-8b - Sample Format for a Tribunal Marriage.

NAME OF MARINE (Last, first, middle) NAME DEF, ALONZO DE AN 123 45 6789 SST TYPE OF SERVICE WISMC SST TYPE OF SERVICE SGT VISMC USMC USMC ORGANIZATION AND STATION PREPARING THIS APPLICATION IST BN 6TH MARINES 2D MARDIV FMFLANT CAMP LEJEUNE NC 28547 FUTURE ADDRESS AND ETA IF TRANSFER IS ANTICIPATED WITHIN 60 DAYS NO. NAME OF DEPENDENT (Include full given name) TONYA CAROL MARINE 123 FOURTH ST JACKSONVILLE NC 28540 Furnish the following information concerning custodian of any dependent named above. DEP NO. FULL NAME OF CUSTODIAN RELATIONSHIP (If child, indicate step, adopted, ward or born out of weddock) PO7071977 200 ADDRESS AND ZIP CODE	C 109 edes a e and v	922 (R all previ	PUCATION (1751 REV. 4-01) (EF) ous editions which a be used) 800	,	WHERE ADDITIONAL SPACE IS NECESSARY TO COMPLETE ITEMS, USE SEPARATE SHEET DATE OF APPLICATION			CHANGE IN DEPENDENTS (Check one) CHANGE IN DEPENDENTS CHANGE IN DEPENDENTS							G	
ARRING ALONZO DE AN 123 45 6789 SGT SUSMC ORGANIZATION AND STATION REPARING THIS APPLICATION IST NO 611M AKAINES 2D MARDIV FMFLANT (CAMP LEJEUNE NC 28547 12160 2000613 20006												CERTIFICATION SECTION GA			GAIN	
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NO. NAME OF DEPENDENT (Include Full given name) 1 TONYA CAROL MARINE 1 1 TONYA CAROL MARINE 1 23 FOURTH ST JACKSONVILLE NC 28540 2 2 3 3 4 4 5 5 6 6 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	URE A	ADDRESS	S AND ETA IF TRANSFI	ER IS ANTICI	IPATED WITHIN 60 DAYS			TO INACTIV				AST DISCHARGE OR DATE OF LAST RELEA			ELEASI	
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4 5 6 Furnish the follow ing information concerning custodian of any dependent named above. DEP NO FULL NAME OF CUSTODIAN RELATIONSHIP TO DEPENDENT ADDRESS AND ZIP CODE INFORMATION CONCERNING PRESENT MARRIAGE HAVE YOU BEEN PREVIOUSLY MARRED? DATE PLACE (County and State) FULL GIVEN NAME OF SPOUSE NO YES NO YES NO YES NO YES NO YES STHERE ASSOCIATION OF THE SPOUSE INFORMATION CONCERNING DISSOLUTION OF EACH FORMER MARRIAGE OF BOTH YOURSELF AND/OR SPOUSE (Continue on separate sheet if new YOUR SELF SPOUSE IN THE DISSOLVED MARRIAGE DISSOLUTION OF EACH FORMER MARRIAGE OF BOTH YOURSELF AND/OR SPOUSE (Continue on separate sheet if new YOUR SELF SPOUSE IN THE DISSOLVED MARRIAGE DISSOLUTION OF EACH FORMER MARRIAGE OF BOTH YOURSELF AND/OR SPOUSE (Continue on separate sheet if new YOUR SELF SPOUSE IN THE DISSOLVED MARRIAGE DISSOLUTION (County and State) DATE OF REASON (Check SELF SPOUSE IN THE DISSOLVED MARRIAGE DISSOLUTION (County and State) DEATH ANNULME STHERE A COURT ORDEROR WRITTEN AGREEMENT IN EFFECT RELATIVE TO SUPPORT/MAINTENANCE/PATERNITY? NO	TO	ONYA	CAROL MARINE					SPOUSE				07071977	20	01053	30	
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Furnish the follow ing information concerning custodian of any dependent named above. DEP NO																
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DATE PLACE (County and State) FULL GIVEN NAME OF SPOUSE NO YES NO			FULL NAME OF CU	ISTODIAN				то	ADDI			ADDF	DRESS AND ZIP CODE			
DATE PLACE (County and State) FULL GIVEN NAME OF SPOUSE NO YES NO			1500M TION 00005	NINO PRES	NIT MA DOM	HAVE YOU			OLI REEN PREVIOLISI V MA PRIED?				HAS PRESENT SPOUSE BEEN			
INFORMATION CONCERNING DISSOLUTION OF EACH FORMER MARRIAGE OF BOTH YOURSELF AND/OR SPOUSE (Continue on separate sheet if necrons promise) NAME of the spouse in the dissolution (County and State) DATE OF DISSOLUTION DEATH ANNULME YOUR SELF SPOUSE SPOUSE SPOUSE STATE OF DISSOLUTION STATE OF DISSOLUTION DEATH ANNULME STHERE A COURT ORDER OR WRITTEN AGREEMENT IN EFFECT RELATIVE TO SUPPORT/MAINTENANCE/PATERNITY? NO	DATE					NI WARNAGE				NO OF PR			_ [NO C	
FORMER MARRIAGE OF (Check one) YOUR SPOUSE SPOUSE SPOUSE IS THERE A COURT ORDER OR WRITTEN AGREEMENT IN EFFECT RELATIVE TO SUPPORT/MAINTENANCE/PATERNITY? NO NAME OF THE SPOUSE IN THE DISSOLVED MARRIAGE DATE OF DISSOLUTION County and State) Place of dissolution (County and State) DEATH ANNULME REASON (Check one) DEATH ANNULME		717		l			BELO	ow.								
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X NO															_	
× NO																
X NO																
YES IF YES, STATE DATE AND PLACE (county and state) WHERE SUCH ORDER/AGREEMENT WAS ISSUED AND ATTACH A COPY.			DRDER OR WRITTEN AGRE	EEMENT IN EFF	ECT RELATIVE	TO SUPPORT/MAINT	TENANC	E/PATERNI	IY?							
	γ	/ES	IF YES, STATE DATE AN	D PLACE (cou	nty and state) \	WHERE SUCH ORDER	R/AGREE	MENT WA	S ISSUE	ED AN	ID ATT.	ACH A C	OPY.			

Figure 1-9a - Sample Format for a Common-Law Marriage.

NAV	/MC 10922 (Rev. 4-01) (EF) Page 2		NA M	ME OF MARINE (Last, firs ARINE, ALONZO DE	t, middle) AN						
PARENT OF FORCES	HAS NATURAL PARENT OTHER THAN CLAIMAN NO	IT OF CHILD(REN) LISTED EVE	ER BEEN A MEMBER OF	ANY U.S. ARMED FORCES	5?						
SECTION 5 NATURAL PARENT CHILD IN ARMED FORCES	YES IF YES, LIST ALL AVAILABLE ID service, inclusive dates of active			it, SSN, grade, type of serv	vice, branch of						
SECTION 6 SPOUSE IN ARMED FORCES	HAS YOUR SPOUSE EVER BEEN A MEMBER OF A NO YES. IF YES, COMPLETE THE BLOCKS										
USEI	SSN GRADE TYPE OF SERVICE	BRANCH OF SERVICE	INCLUSIVE DATES	OF ACTIVE SERVICE	ВАН						
6 SPC	REGULAR				WITH DEPENDENTS						
SECTION	RESERVE		WITHOUT DEPENDENTS BAH DIFF								
SECTION 7 CERTIFICATION	I CERTIFY that all the above statements are knowledge and belief, and I consent to chec any allowances paid on laws and regulations inform my commanding officer of any chang status of my dependents, whether it be the dependents, or the loss of dependents.	as a result of the proce laimed dependents or o	ease of any information essing/adjudication of this custodians thereof, to the on of benefits, entitlements y dependents.								
7 CERT			123	45 6789	SGT						
NOL	(Signature of Marine) (Social Security Number) (Grade)										
SEC	Subscribed and sworn 10 day of June 01										
	(Signature and Title of attesting officer)										
	Document Viewed (List and attach all documents viewed) T. J. STEWART, CWO2, USMC, PERSO (Type Name grade of attesting office)										
	FOR USE BY COMMAND APPROVING AUTHORITY:	FOR USE BY UNIT DIARY	CLERK:		MC APPROVING AUTHORITY:						
	APPROVED AS CLAIMED FORWARDED TO COOPER APPROVAL FOR APPROVAL FOR DEPENDENT NUMBER	REPORTED ON UNIT D	DIARY:								
	APPROVED FOR 1 DEPENDENT	NO									
λ	NUMBERS:	DATED									
АUTHORITY	APPROVED FOR CHILD BORN OUT OF WEDLOCK FOR DEERS	RUC									
APPROVING	ELIGIBILITY PER MCO P5512.11. CHECK ONE	ENTRIES REPORTED:									
	CHILD RESIDES IN MEMBER'S HOUSEHOLD COURT ORDER										
SECTION 8	(Recertify annually) No Court Order										
S	(Signature of commanding officer)										
	JOHN A. MAY, MAJOR (Typed name and grade of commanding officer)									
	1STBN 6THMAR 2DMARDIV FMFLAN (Unit Designation)	VT _									

ORIGINA

Designed Using FormFlow 2.22, HQMC/ARSE, May 01

Figure 1-9b - Sample Format for a Common-Law Marriage.

NA۱	/MC 1	0922 (F	PLICATION (1751) REV. 4-01) (EF) ous editions which a		INSTRUCTIONS WHERE ADDITIONAL SPACE IS NECESSARY TO COMPLETE ITEMS, USE SEPARATE SHEET								
obsc	lete an		be used)	ile	DATE OF AP		M IE SHEET	CHANGE IN DEPENDENTS (Check one) CHANGE IN DEPENDENTS					
						20010609		START LOSS (EXPLAIN IN CERTIFICATION SECTION GA					
			E (Last, first, middle) ONZO DEAN		SSN	123 45 6	789	GRADE SGT	1	USMC		ISMCR	
SECTION 1. NTIFICATION	1ST	BN 6TH	AND STATION PREPAR MARINES 2D MAF UNE NC 28547								RENT ENLISTMENT/APPOINTMENT OR TING FOR ACTIVE DUTY (WHICHEVER IS 000613		
‴ Z	FUTURE	EADDRESS	S AND ETA IF TRANSFE	RISANTICI	PATED WITHIN	I 60 DAYS	ECC 040	0612	DATE OF LAS	ST DISCHARGE OR DATE OF LAST RELEASE DUTY			
_	NO.		IE OF DEPENDENT ude full given name)		COMPLETE ADDRESS (Include Zip Code)			RELATIONS , indicate ste r born out o	p, adopted,	DATE OF BIRTH (Day, Mo., Year)	DATE ALLO CLAIMED previously a give date of	FROM (If pproved,	
DEPENDENT INFORMATION	1												
NT IN	2												
DEPEND	3												
SECTION 2	4												
SEC	5												
z	6												
STODIA		the follow	ing information concern	ing cus todiar	n of any depen	e.							
SECTION 3 CUSTODIAN INFORMATION	NO DEP		FULL NAME OF CU	STODIAN		RELATION DEPEN			ADI	DRESS AND ZIP	CODE		
SECTION													
NOIL		II.	NFORMATION CONCER	NING PRESE	NT MARRIAGE		EN PREVIOU	ISLY MARRIED?	HAS PRESENT SPOUSE BEEN PREVIOUSLY MARRIED?				
EMBER AND SPOUSE AND INFORMATION RT/PATERNITY	DATI	E PLAC	EE (County and State)	FULL (GIVEN NAME (OF SPOUSE	NO LE FITHER AN					TIMES	
AND	INFORM	MATION C	ONCERNING DISSOLU	TION OF FA	CH FORMER M.	ARRIAGE OF BO	BELOW.						
POUSE	MARR	RMER RIAGE OF	NAME OF THE SP	OUSE IN	DATE OF		Place of dis	ssolution		REA	SON (Check or	ne)	
R AND S	YOUR- SELF	SPOUSE	THE DISSOLVED M		DISSOLUTIO	N	(County a			DEATH	ANNULMENT	DIVORCE	
≥0	20010009					ONSLOW	/ NC					X	
SERVIC DING SU													
ATUS OI REGARI													
4 MARITAL STATUS OF SERVICE REGARDING SUPP	IS THERE	E A COURT	ORDER OR WRITTEN AGRE	EMENT IN EFF	ECT RELATIVE TO	O SUPPORT/MAINTE	ENANCE/PATERN	ITY?				ļ	
	NO YES IF YES, STATE DATE AND PLACE (county and state) WHERE SUCH ORDER/AGREEMENT WAS ISSUED AND ATTACH A COPY.												
SECTION	X	YES	IF YES, STATE DATE AN 0010609 ONSLOW				/AGREEMENT WA	AS ISSUED A	IND ATTACH A	COPY.			
	GINAL	2	0010009 ONSLOW	COUNTY	NOKI H CA	KOLINA			Designed Usi	ng FormFlow 2.2	2, HQMC/AR	SE, Apr 01	

Figure 1-10a - Sample Format for a Divorce.

NAV	/MC 10922 (Rev	v. 4-01)) (EF) Page 2			NAME OF MARINE (MARINE, ALON	Last, first NZO DE	, middle) AN			
ARENT OF	HAS NATURAL PARE	NT OTHE	R THAN CLAIMANT	OF CHILD(REN) LISTED EV	ER BEEN A MEMBER	OF ANY U.S. ARMEL	FORCES'	?			
SECTION 5 NATURAL PARENT CHILD IN ARMED FORCES				NTIFYING INFORMATION (I		arent, SSN, grade, ty	pe of servi	ce, bran	ch of		
SECTION 6 SPOUSE IN ARMED FORCES	NO NO		N A MEMBER OF AN	NY U.S. ARMED FORCES?							
USEI	SSN	GRADE	TYPE OF SERVICE	BRANCH OF SERVICE	INCLUSIVEDA	TES OF ACTIVE SER	/ICE		ВАН		
s sPO								w	ITH DEPENDENTS		
SECTION (REGULAR					=			
SECTION 7 CERTIFICATION	knowledge and belied any allowances paid	ef, and I d on laws ding offic dents, wh	consent to check is and regulations. iter of any change thether it be the g	in the number and/or	hereon or obtain application, to mextent necessary	ed as a result of the ny claimed depende	ne proces ents or c judication	ssing/ad ustodia n of bei	judication of this ns thereof, to the nefits, entitlements		
7 CERT			23 45 6789		_	SGT					
SECTION	Subscribed and sworn	1	(Signat ure	of Marine) June 0	•	Security Number)			(Grade)		
	before me this			all documents viewed		(Signature ar	nd Title of a	ttesting o	officer)		
	Document \	/iewed	STEWART, CWC	WO2, USMC,PERSO							
	FOR LICE BY COMMAND	ADDDOM (IN)	O ALITHODITY:	LEOD HOE BY HAUT BIA BY	OLEDIA	(Type Name					
	FOR USE BY COMMAND APPROVED AS CLAIMED	APPROVIN	FORWARDED TO CM (CODE MRP-1) FOR APPROVAL FOR DEPENDENT NUMBE	REPORTED ON UNIT D		FOR	USE BY CN	IC APHR	OVING AUTHORITY:		
	APPROVED FOR DEPENDENT	-	DELENDENT NOMBER	NO							
λ	NUMBERS:	_		DATED							
6 А ЈТНОВІТУ	APPROVED FOI OUT OF WEDLO	OCK FOR D		RUC					WITH DEPENDENTS BAH DIFF Be of any information ng/adjudication of this todians thereof, to the of benefits, entitlements expendents. SGT (Grade) Sting officer) PERSO		
APPROV IN	ELICIBILITY PER MCO P5512.11. CHECK ONE ENTRIES REPORTED:										
œ	CHILD RESIDES IN MEMBER'S HOUSEHOLD (Recertify annu No Court Order	ally)	COURT ORDER	(Ensure the prope is recorded)	ken						
SECTION											
	(Signature o	of commar	nding officer)								
	JOHN A. MAY, (Typed name and g		commanding officer)								
	1STBN 6THMAF			Γ							
	(Unit	Designat	tion)								

Designed Using FormFlow 2.22, HQMC/ARSE, May 01

Figure 1-10b - Sample Format for a Divorce.

NA۱	PENDENCY APPLICATION (1751) VMC 10922 (REV. 4-01) (EF) persedes all previous editions which are olete and will not be used) 10109-LF-984-9800					WHERE AD	OITION	TRUCTION	ECESSARY TO							G
obsc	lete an	ıd will r	ot I	be used)	re	DATE OF A		MS, USE SEPAR	A LE SHEET				GE IN DEPEN (Check one) ANGE IN DEPEN			
							2	20010609		st	ΓART		LOSS (EXPLAIN CERTIFICATION	IN		GAIN
				(Last, first, middle) NZO DEAN		SS	SN	123 45 67	89	GRADE SGT		YPE OF	SERVICE USMC		US	SMCR
SECTION 1.	1ST	BN 6T	ΗМ	ND STATION PREPARI MARINES 2D MAR NE NC 28547					UNIT R	uc 2160		REPORT	RENT ENLISTMEN ING FOR ACTIVE	DUTY (WH		
S E	FUTURE	E A D DRE	SS /	AND ETA IF TRANSFE	RISANTICI	PATED WITH	HIN 60	DAYS	ECC 04	0612		OF LAST	0006 DISCHARGE OF DUTY		LAST F	RELEASE
	NO.			OF DEPENDENT de full given name)		COMPLET (Include			(if child	RELATIONS I, indicate ste or born out o	ep, adop	ted,	ATE OF BIRTH Day, Mo., Year)	DATE A CLAIM previou give dat	ALLOW IED FF Isly app e of app	WANCE ROM (If proved, pproval)
DEPENDENT INFORMATION	1	JILL I	ELI	SE MARINE	123 FC JACKS	OURTH ST SONVILLE	NC	28540		DAUGHT	ER		08061994		EV A 9406	
T INFO	2															
DEPENDE	3															
SECTION 2	4															
SE	5															
z	6															
STODIA ION	Furnish	the follo	w in	g information concerni	ng cus todiar	n of any depe	ndent	named above								
SECTION 3 CUSTODIAN INFORMATION	NO			FULL NAME OF CU	STODIAN	RELATIONSHIP TO DEPENDENT						ADDF	RESS AND ZIP	CODE		
SECTIC	1	ALON	ΙZΟ	DEAN MARINE		FATHER			HER	SAME AS ABOVE						
NOL			INF	FORMATION CONCER	NING PRESE	NT MARRIA	GE		HAVE YOU BE	EEN PREVIOU	JSLY MA	NO OF	PREVIOUSLY		BEEN] NO OF
INFORMA	DAT	E PL	ACE	(County and State)	FULL	GIVEN NAME	E OF S	SPOUSE	IF EITHER A	YES NSWER AB	OVEIS	TIMES	GIVE INFORM.	YES	QUES.	TIMES
EAND			СО	NCERNING DISSOLU	TION OF EAC	CH FORMER	MARF	RIAGE OF BOT	BELOW. H YOURSELF	AND/OR S	POUSE	(Continu	ie on separate	sheet if ne	cessa	ry)
sPous ™	MARF	RMER RIAGE OF eck one)		NAME OF THE SPO		DATEO			Place of d	isso lution			RE	ASON (Che	ck one	e)
ER AND ATERNIT	YOUR- SELF	SPOUS	SE	THE DISSOLVED M	ARRIAGE	DISSOLUT	ION		(County	and State)			DEATH	ANNULM	ENT	DIVORCE
E M BM BE	×	X TONYA CAROL MARINE					09	ONSLOW	NC							
SERVIC															_	
TATUS OF REGAR															_	
4 MARITAL STATUS OF SERVICE MEMBER AND SPOUSE AND INFORMATION RESARDING SUPPORT/PATERNITY	IS THERE A COURT ORDER OR WRITTEN A GREEMENT IN EFFECT RELATIVE TO SUPPORT/M						JPPORT/MAINTEI	NANCE/PATER	NITY?							
0N 4 M.	YES IF YES, STATE DATE AND PLACE (county and state) WHERE SUCH ORDE								AGREEMENT W	AS ISSUED A	AND ATT	ГАСНА С	OPY.			
SECTION			20	010609 ONSLOW	COUNTY	NORTH C	ARO	LINA								
OBL	CINIAI				·		· <u> </u>			·	Design	ned Using	FormFlow 2.2	2, HQMC	/ARSE	E, Apr 01

Figure 1-11a - Sample Format for a Divorced Marine, Children Involved.

ORIGINAL

NAV	/MC 10922 (Rev	v. 4-01)) (EF) Page 2			MARINE, ALON		
INT OF	HAS NATURAL PAREN	NT OTHER	R THAN CLAIMANT	OF CHILD(REN) LISTED EV	ER BEEN A MEMBER (OF ANY U.S. ARMED	FORCES'	?
SECTION 5 NATURAL PARENT CHILD IN ARMED FORCES	1 YES			IT IFYING INFORMATION (I ervice, and full name of child		arent, SSN, grade, tyj	pe of servi	ice, branch of
RMED FORCES	NO NO			Y U.S. ARMED FORCES?				
USEINA	YES. IF YES		TYPE OF SERVICE	BRANCH OF SERVICE	INCLUSIVEDA	TES OF ACTIVE SERV	/ICE	ВАН
SECTION 6 SPOUSE IN ARMED			REGULAR RESERVE					WITH DEPENDENTS WITHOUT DEPENDENTS BAH DIFF
CERTIFICATION	knowledge and believany allowances paid	ef, and I d on laws ding offic dents, wh	consent to checka s and regulations. cer of any change in thether it be the ga	in the number and/or	hereon or obtaine application, to m extent necessary	ed as a result of th y claimed depende	ne proces ents or c judication	asse of any information ssing/adjudication of this ustodians thereof, to the n of benefits, entitlements dependents.
	_		23 45 6789		SGT			
SECTION 7	Subscribed and sworn before me this	1	(Signature of	June 0		Security Number)		(Grade)
		/:d			. T. I. S	(Signature ar		attesting officer)
	Document \	/ iew ea	(List and attach	all documents viewe	ed)			ttesting officer)
	FOR USE BY COMMAND	APPROVING	G AUTHORITY:	FOR USE BY UNIT DIARY	CLERK:			MC APPROVING AUTHORITY:
	APPROVED AS CLAIMED		FORWARDED TO CMC (CODE MRP-1) FOR APPROVAL FOR DEPENDENT NUMBERS	REPORTED ON UNIT D	DIARY:			
	A PPROVED FOR DEPENDENT NUMBERS:	-		_ NO				
RITY		_		DATED				
G А ОТНОRITY	APPROVED FOI OUT OF WEDLO ELIGIBILITY PER	OCK FOR D		RUC				
APPROVING	P5512.11. CHI			ENTRIES REPORTED:	mar diam; action :	talran		
	RESIDES IN MEMBER'S HOUSEHOLD (Recertify annu	ally)	COURT ORDER	is recorded)	per diary action	lakeli		
SECTION	No Court Order							
	(Signature o	f commar	nding officer)					
	JOHN A. MAY,							
	(Typed name and o	grade of c	ommanding officer)					
			RDIV FMFLANT	_				
	(Unit	Designat	1011)	1				

Figure 1-11b - Sample Format for a Divorced Marine, Children Involved.

Designed Using FormFlow 2.22, HQMC/ARSE, May 01

VMC 10 persedes	922 (R all previ I will not	PLICATION (1751) IEV. 4-01) (EF) ous editions which a be used) 800		INSTRUCTIONS WHERE ADDITIONAL SPACE IS NECESSARY TO COMPLETE ITEMS, USE SEPARATE SHEET DATE OF APPLICATION 20010609					(CH CHAN	APPLICATION GE IN DEPE (Check one HANGE IN DEPE LOSS (EXPLAI	NDENTS) NDENTS		G	
									ART		CERTIFICATIO		X	GAIN
		E(Last, first, middle)		SSN	123 45 6	789		GRADE SGT	T	YPE OF	SERVICE USMC		US	MCR
1ST E	BN 6TH	AND STATION PREPARI MARINES 2D MAR UNE NC 28547					IT RU	C 160		REPORT	RENT ENLISTM ING FOR ACTIV			
FUTURE	ADDRESS	S AND ETA IF TRANSFE	RISANTICI	PATED WITHIN	N 60 DAYS	ECC	0406	512		OF LAS	000 T DISCHARGE (DUTY		AST RI	ELEASE
NO.		E OF DEPENDENT ude full given name)		COMPLETE (Include 2			RE child,	ELATIONS indicate ste born out o	p, adopt	rea,	OATE OF BIRT (Day, Mo., Year	previously	ED FR	OM 41 ved give
1 T	ONYA	CAROL MARINE		OURTH ST SONVILLE	NC 28540			SPOUSI	Ξ		07071977	20	0105	30
2														
3														
4														
5														
6														
Furnish t	he follow	ing information concerni	ng cus todiar	of any depen	dent named abov	e.								
DEP NO		FULL NAME OF CU	STODIAN	N RELATIONSHIP TO DEPENDENT						ADD	RESS AND ZI	CODE		
	IN	NFORMATION CONCER	NING PRESE	нам			E YOU BEEN PREVIOUSLY MARRIED?			HAS PRESENT SPOUSE BEEN				
DATE		E (County and State)		GIVEN NAME		NO	NO OF			PREVIOUSL NO [Y MARRIED?	1	NO OF	
2001 0530		D NV ONCERNING DISSOLU		CAROL GE		BELOW.					GIVE INFOR			
FOR MARRIA	MER AGE OF k one)	NAME OF THE SPO	DUSE IN	DATE OF				solution	OUOL	(COIIIIII		EASON (Che		
YOUR- SELF	SPOUSE	THE DISSOLVED M	A RRIA GE	DISSOLUTIO	DN	(Cou	inty and	d State)			DEATH	ANNULM	ENT D	IVORC
	× CALVIN LIONEL CASSEL		CASSELL	20001104	JUAREZ	MEXICO)							×
X	A COURT (ORDER OR WRITTEN AGRE							ND ATT	ACH A	COPY.			
											g FormFlow 2			

Figure 1-12a - Sample Format for a Marriage When a Foreign Divorce is Involved, by a Spouse Who is a United States Citizen.

ORIGINAL

NAV	VMC 10922 (Rev	v. 4-01)) (EF) Page 2			NAME OF MARIN MARINE, ALC	E (Last, first, ONZO DE A	, middle) AN			
ARENT OF ORCES	HAS NATURAL PARE	NT OTHE	R THAN CLAIMANT	OF CHILD(REN) LISTED EVI	er been a member	OF ANY U.S. ARM	ED FORCES?	?			
SECTION 5 NATURAL PARENT CHILD IN ARMED FORCES				NTIFYING INFORMATION (fervice, and full name of child		parent, SSN, grade,	type of servi	ce, branch of			
ECTION 6 SPOUSE IN ARMED FORCES	X NO		N A MEMBER OF AN	Y U.S. ARMED FORCES?							
JSE IN A	SSN SSN		TYPE OF SERVICE	BRANCH OF SERVICE	INCLUSIVEDA	TES OF ACTIVE SE	RVICE	ВАН			
SECTION 6 SPOI			REGULAR RESERVE					WITH DEPENDENTS WITHOUT DEPENDENTS BAH DIFF			
CERTIFICATION	knowledge and belicany allowances paid	ef, and I d on laws ding offic dents, w	consent to checka s and regulations. cer of any change hether it be the ga	in the number and/or	hereon or obtain application, to n extent necessary	ed as a result of ny claimed deper	the proces ndents or co adjudication	ase of any information sing/adjudication of this ustodians thereof, to the n of benefits, entitlements dependents.			
	_		23 45 6789		SGT						
SECTION 7	(Signature of Marine) (Social Security Number)										
S	Subscribed and sworn before me this	1	10 day of	June 0	1	(Signature	e and Title of a	ttesting officer)			
	X Document	View ed	(List and attacl	n all documents view	ed) T. J. SI	EWART, CWO					
	FOR USE BY COMMAND	APPROVIN		FOR USE BY UNIT DIARY	CLERK:		e Name grade of attesting officer) FOR USE BY CMC APPROVING AUTHORITY:				
	APPROVED AS CLAIMED	X	FORWARDED TO CMG (CODE MRP-1) FOR APPROVAL FOR DEPENDENT NUMBER	REPORTED ON UNIT D	DIARY:						
	APPROVED FOR DEPENDENT	-	1	NO							
È	NUMBERS:			DATED							
АОТНОВІТУ	APPROVED FO OUT OF WEDL			RUC							
S N	ELIGIBILITY PEI P5512.11. CH			ENTRIES REPORTED:							
8 APPROV	CHILD RESIDES IN MEMBER'S HOUSEHOLD COURT ORDER										
SECTION	(Recertify annu No Court Orde	ually) er									
Ø	(Signature o	(Signature of commanding officer)									
	JOHN A. MAY,		commanding officer)								
		R 2DMA t Designat	RDIV FMFLANT								

Figure 1-12b - Sample Format for a Marriage When a Foreign Divorce is Involved, by a Spouse Who is a United States Citizen.

Designed Using FormFlow 2.22, HQMC/ARSE, May 01

NA۱	/MC 1	0922 (F	PLICATION (1751) REV. 4-01) (EF) ious editions which a		WHERE ADD	NSTRUCTION INTIONAL SPACE IS N E ITEMS, USE SEPA	IECESSARY TO	REASON	(0	S APPLICATION CHECK ONE)		G
obsc	lete an		t be used)	0	DATE OF AF			1	1	(Check one)		
						20010609		X st	ART	CHANGE IN DEPEN LOSS (EXPLAIN CERTIFICATION	IN 🔽	GAIN
			E (Last, first, middle) ONZO DEAN		SSN	123 45 67	789	GRADE SGT	l —	OF SERVICE USMC		SMCR
SECTION 1.	1ST	BN 6TH	AND STATION PREPAR MARINES 2D MAF UNE NC 28547				UNIT RU	160		URRENT ENLISTMEN DRTING FOR ACTIVE	DUTY (WHICHE	
ω Έ	FUTURE	E ADDRES	S AND ETA IF TRANSFE	RISANTICI	PATED WITHI	N 60 DAYS	ECC 040	0612	DATE OF L	AST DISCHARGE OF		RELEASE
z	NO.		ME OF DEPENDENT lude full given name)		COMPLETE (Include 2		(if child	RELATIONS , indicate ste or born out o	p, adopted,	DATE OF BIRTH (Day, Mo., Year)	DATE ALLO CLAIMED previously a give date of	pproved,
ORMATIO	1	TONYA	CAROL MARINE		OURTH ST SONVILLE	NC 28540		SPOUSI	E	07071977	20010	530
DEPENDENT INFORMATION		JILL EL	ISE CASSELL	SAME	E AS ABOVI	Ξ	STI	EPDAUG	HTER	08061995	20010	530
	4											
SECTION 2	5											
	6											
ODIAN	Furnish	the follow	ing information concern	ing cus todiar	n of any deper	ndent named abov	e.					
SECTION 3 CUSTODIAN INFORMATION	DEP NO		FULL NAME OF CU	STODIAN		RELATION DEPEN			Αſ	DRESS AND ZIP	CODE	
SECTION	2	TONYA	A CAROL MARINE			HER	SAM	E AS ABO	VE	3		
NOI			NFORMATION CONCER	ning prese	NT MARRIAG	E	HAVE YOU BE	EN PREVIOU		PREVIOUSLY	T SPOUSE BEEN MARRIED?	
IFORMA1	DAT	E PLAC	CE (County and State)	FULL	GIVEN NAME	OF SPOUSE	X NO	YES	NO (ES X NO L	YES	NO OF TIMES
ANDIN	2001 053		O NV ONCERNING DISSOLU		CAROL GI		BELOW.			tinua on congreto		
Pouse	FO MARF	RMER RIAGE OF	NAME OF THE SP		DATEOF	IAINIAGE OF BO	Place of di		10001 (0011		SON (Check or	
M EMBER AND SPOUSE AND INFORMATION PORT/PATERNITY	YOUR- SELF	SPOUSE	THE DISSOLVED N		DISSOLUTIO	ON	(County a			DEATH	ANNULMENT	DIVORCE
EMBMBE PPORT/P/												
F SERVIC DING SU												
TATUS O REGAR												
ARITAL S	IS THERE A COURT ORDER OR WRITTEN AGREEMENT IN EFFECT RELATIVE TO						ENANCE/PATERN	IITY?				
SECTION 4 MARITAL STATUS OF SERVICE RECARDING SUFF		NO YES	IF YES, STATE DATE AN	D PLACE (cou	nty and state) W	HERE SUCH ORDER	AGREEMENT WA	AS ISSUED A	ND ATTACH	A COPY.		
_	GINAL								Designed Us	sing FormFlow 2.2	2, HQMC/ARS	SE, Apr 01

Figure 1-13a - Sample Format for a Stepchild.

NA	VMC 10922 (Rev	/. 4-01)	(EF) Page 2			NAME OF MARINE (Last, fi MARINE, ALONZO D	rst, middle) EAN
SECTION 5 NATURAL PARENT OF CHILD IN ARMED FORCES	NO YES IF YE	S, LIST A	LL AVAILABLEIDE		Full name of natural p	OF ANY U.S. ARMED FORCE	
SECTION 6 SPOUSE IN ARMED FORCES	X NO	S, COMPL	TYPE OF SERVICE REGULAR RESERVE	Y U.S. ARMED FORCES? ELOW. BRANCH OF SERVICE	INCLUSIVEDA	TES OF ACTIVE SERVICE	BAH WITH DEPENDENTS WITHOUT DEPENDENTS BAH DIFF
SECTION 7 CERTIFICATION	knowledge and belied	ef, and I d on laws ding offic dents, wi loss of d	consent to checks and regulations. Ser of any change hether it be the gar ependents. (Signature of the change have been dependent depen	in the number and/or ain of additional	hereon or obtain application, to mextent necessary and/or of my leg	ed as a result of the production of the producti	SGT (Grade) f attesting officer) AC,PERSO
SECTION 8 APPROVING AUTHORITY	JOHN A. MAY, (Typed name and statement of the statement o	R CHILD BOOCK FOR DE R MCO ECK ONE Lially) f Commai	FORWARDED TO CMC (CODE MFP-1) FOR APPROVAL FOR DEPENDENT NUMBER COURT ORDER and ing officer) COMMANDER COURT ORDER RDIV FMFLANT	REPORTED ON UNIT E NO. DATED RUC ENTRIES REPORTED: (Ensure the pro is recorded)	DIARY:	FOR USE BY	CMC APPROVING AUTHORITY:

ORIGINAI

Designed Using FormFlow 2.22, HQMC/ARSE, May 01

Figure 1-13b - Sample Format for a Stepchild.

NAVM (Supers	C 10 sedes a	922 (F all previ	PUCATION (1751) REV. 4-01) (EF) ious editions which a		1	DDITIONA	RUCTION IL SPACE IS NI 15, USE SEPAR	IBCES SA		CHANGE IN DEPENDENTS						G	
SN: 01			t be used) 800		DATE OF	APPLICA	ATION						(C	heck one) SE IN DEPEN	DENTS		
						20	0010609			S	ΓART			SS (EXPLAIN RTIFICATION		X	GAIN
			E (Last, first, middle)		S	SSN	123 45 67	789		GRADE SGT		TYPE (_	RVICE SMC		US	SMCR
1	ST B	N 6TH	AND STATION PREPAR MARINES 2D MAR UNE NC 28547			I		1	UNIT RU	c 160		E REPO		T ENLISTME	DUTY (WH		
FUT	URE A	DDRESS	S AND ETA IF TRANSFE	RISANTICI	PATED WIT	THIN 60 I	DAYS	E	ECC 040	612		E OF LA		0006 SCHARGE OF		LAST F	RELEASE
NC).		IE OF DEPENDENT ude full given name)		COMPLE (Includ	ETE ADDI de Zip Cod			R (if child,	ELATIONS indicate ste	p, ado			E OF BIRTH , Mo., Year)	CL AIM previously	ED FF	wed give
1	Т	ONYA	CAROL MARINE		OURTH S		28540			SPOUS	Е		0	7071977		appi 99808	
2	JI	LL EL	ISE CASSELL	SAME	AS ABO	VE				ADOPTI AUGHT			08	8061998	20	00106	608
3																	
5																	
6																	
Fui	nish th	e follow	ing information concerni	ng cus todian	n of any dep	pendent r	named above	e.									
DE			FULL NAME OF CU	STODIAN	RELATIONSHIP TO DEPENDENT			0			ΑC	DDRES	SS AND ZIP	CODE			
2	Т	ONYA	CAROL MARINE		MOTHER			HER	SAME AS ABOV			VE					
			NFORMATION CONCER	NING PRESE	NT MARRIA	AGE		HAVE	YOU BEE	N PREVIOL	JSLY M		.	HAS PRESEN PREVIOUSLY	NT SPOUSE BEEN MARRIED?] NO 05
ı	DATE	PLAC	E (County and State)	FULL (GIVEN NAM	ME OF SP	OUSE	X	NO	YES		NO (× NO	YES		NO OF TIMES
	80814 -ORMA		○ NV ONCERNING DISSOLU		CAROL		A GE OF BOT	BELO	w.					VE INFORM			
	FORM MARRIA (Check	MER GE OF	NAME OF THE SPO		DATE		NOE OF BOT		ce of dis		1000	_ (00111			ASON (Che		•
	NID.	SPOUSE	THE DISSOLVED M	ARRIAGE	DISSOLU.	TION		(0	County an	d State)				DEATH	ANNULM	ENT	DIVORCE
									<u> </u>								
			ORDER OR WRITTEN AGRE	EMENT IN EFFI	ECT RELATIV	'E TO SUP	PFORT/MAINTE	NANCE	/PATERNI	TY?							
		NO res	IF YES, STATE DATE ANI	O PLACE (cour	nty and state)) WHERE S	SUCH ORDER/	'AGR⊞N	MENT WA	S ISSUED A	ND AT	ТАСН	A COP	Y.			
OPICIN											Desi-	nod II-	sine F	ormFlow 2.2	2 1040	/A DOT	- Apr 0.1

Figure 1-14a - Sample Format for an Adopted Child.

ORIGINAL

NA۱	/MC 10922 (Rev. 4-01) (EF) Page 2		NA M.	ME OF MARINE (Last, firs ARINE, ALONZO DE	t, middle) AN
ARENT OF ORCES	HAS NATURAL PARENT OTHER THAN CLAIMANT OF NO	CHILD(REN) LISTED EVE	ER BEEN A MEMBER OF A	ANY U.S. ARMED FORCES	\$?
SECTION 5 NATURAL PARENT CHILD IN ARMED FORCES	YES IF YES, LIST ALL AVAILABLE IDENT II service, inclusive dates of active service.			it, SSN, grade, type of sen	vice, branch of
SECTION 6 SPOUSE IN ARMED FORCES	HAS YOUR SPOUSE EVER BEEN A MEMBER OF ANY U NO YES. IF YES, COMPLETE THE BLOCKS BELOW				
USEIN	SSN GRADE TYPE OF SERVICE E	RANCH OF SERVICE	INCLUSIVE DATES	OF ACTIVE SERVICE	ВАН
SECTION 6 SPO	REGULAR RESERVE				WITH DEPENDENTS WITHOUT DEPENDENTS BAH DIFF
ICATION	I CERTIFY that all the above statements are true knowledge and belief, and I consent to checkage any allowances paid on laws and regulations. I winform my commanding officer of any change in status of my dependents, whether it be the gain dependents, or the loss of dependents.	against my pay for vill immediately the number and/or	hereon or obtained a application, to my c extent necessary fo	as a result of the proce laimed dependents or o	ease of any information ssing/adjudication of this custodians thereof, to the on of benefits, entitlements / dependents.
CERTIFICATION		45 6789	SGT		
	(Signature of M	arine)		urity Number)	(Grade)
SECTION 7	Subscribed and sworn 10 day of	June 0:		(Signature and Title of VART, CWO2, USMC	- '
		T		(Type Name grade of	
	FOR USE BY COMMAND APPROVING AUTHORITY: FORWARDED TO CMC (CODE MRP-1) FOR APPROVAL FOR DEPENDENT NUMBERS	FOR USE BY UNIT DIARY REPORTED ON UNIT D		FOR USE BY C	MC APPROVING AUTHORITY:
	APPROVED FOR DEPENDENT NUMBERS:	NO			
AUTHORITY	APPROVED FOR CHILD BORN OUT OF WEDLOCK FOR DEERS	RUC			
NG NG	ELIGIBILITY PER MCO P5512.11. CHECK ONE CHILD	ENTRIES REPORTED:			
SECTION 8 APPROV	RESIDES IN COURT ORDER HOUSEHOLD (Recetify annually) No Court Order	(Ensure the proper diary action taken is recorded)			
	(Signature of commanding officer)				
	JOHN A. MAY, MAJOR				
	(Typed name and grade of commanding officer)				
	1STBN 6THMAR 2DMARDIV FMFLANT (Unit Designation)				
ORIG	GINAL			Designed Using Form	Flow 2.22, HQMC/ARSE, May 01

Figure 1-14b - Sample Format for an Adopted Child.

NAV (Sup	/MC 1 ersedes olete an	0922 (F s all prev	PUCATION (1751 REV. 4-01) (EF) ious editions which a t be used) 800	•	INSTRUCTIONS WHERE ADDITIONAL SPACE IS NECESSARY TO COMPLETE ITEMS, USE SEPARATE SHEET DATE OF APPLICATION 20010609 SSN				ON FOR	CHA	S APPLICATION CHECK ONE) NGE IN DEPER (Check one CHANGE IN DEPER LOSS (EXPLAIN	NDENTS) NDENTS I IN		G
	NAME	OE MA DIN	IE (Last, first, middle)		199			GRADI		TYPE	CERTIFICATION OF SERVICE	SECTION		GAIN
			ONZO DEAN			123 45 6	789		T T	X	_		USI	MCR
SECTION 1.	1ST	BN 6TH	AND STATION PREPAR MARINES 2D MAR UNE NC 28547				UNIT	RUC 12160		E REPO	URRENT ENLISTME ORTING FOR ACTIV	E DUTY (WH		
ω z	FUTURE	ADDRES	S AND ETA IF TRANSFE	R IS ANTICI	PATED WITHII	N 60 DAYS	ECC 0	40612			AST DISCHARGE O		LAST RE	ELEASE
_	NO.		ME OF DEPENDENT lude full given name)		COMPLETE (Include 2			RELATIO ld, indicate or born ou	step, ado		DATE OF BIRT (Day, Mo., Year)		1ED FR	OM (If roved,
DEPENDENT INFORMATION	1													
DENT INF	2													
	3													
SECTION 2	5													
•,	6													
N N N	Furnish	the follow	ing information concern	ing custodiar	of any depen	dent named abov	re.							
SECTION 3 CUSTODIAN INFORMATION	DEP NO		FULL NAME OF CU	STODIAN		NSHIP TO IDENT			ΑC	DRESS AND ZIE	CODE			
							1				Lua o porcer	UT MOUSE		
NOIT			NFORMATION CONCER	RNING PRESE	NT MARRIAG	E	HAVE YOU I		IOUSLY M	ARRIED NO (PREVIOUSL	NT SPOUSE E Y MARRIED?	BEEN	NO OF
EMBER AND SPOUSE AND INFORMATION RT/PATERNITY	DATI	E PLAC	CE (County and State)	FULL (GIVEN NAME	OF SPOUSE		X YES	ABOVE I	TIME S " YES	S", GIVE INFORM	YES IATION RE	QUEST	TIMES
SE AN		MATION C RMER	ONCERNING DISSOLU	TION OF EAC	CH FORMER M	ARRIAGE OF BO		F AND/OF	RSPOUS	E (Cont	tinue on separate	sheet if ne	cessar	y)
SPOU	MARR	RIAGE OF eck one)	NAME OF THE SP		DATE OF DISSOLUTION	N.		dissolution	ı		RE	ASON (Che	eck one)	
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4 MARITAL STATUS OF SERVICE M REGARDING SUPPC														
A ARITAL:	IS THERE	E A COURT	ORDER OR WRITTEN AGRE	EMENT IN EFF	ECT RELATIVE T	O SUPPORT/MAINT	ENANCE/PATE	RNITY?						
SECTION 4 N		YES	IF YES, STATE DATE AN	D PLACE (cou	nty and state) W	HERE SUCH ORDER	VAGREEMENT \	WAS ISSUEI	D AND AT	TACH	A COPY.			
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Figure 1-15a - Sample Format for Death of a Dependent.

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NA۱	VMC 10922 (Rev.	4-01) (EF)	Page 2			NAME OF MAR MARINE, A					
ARENT OF ORCES	HAS NATURAL PARENT	T OTHER THAN	I CLAIMANT C	DF CHILD(REN) LISTED EVE	ER BEEN A MEMBER C	OF ANY U.S. AI	RMED FORCES	?			
SECTION 5 NATURAL PARENT CHILD IN ARMED FORCES				TIFYING INFORMATION (F		rent, SSN, grad	e, type of serv	ice, branch of			
SECTION 6 SPOUSE IN ARMED FORCES	X NO	ER BEEN A ME		U.S. ARMED FORCES?							
USE IN A		GRADE TYPE		BRANCH OF SERVICE	INCLUSIVEDAT	ES OF ACTIVE	SERVICE	ВАН			
SECTION 6 SPO			REGULAR RESERVE					WITH DEPENDENTS WITHOUT DEPENDENTS BAH DIFF			
CERTIFICATION	I CERTIFY that all the knowledge and belief any allowances paid inform my commandii status of my depende dependents, or the lo	, and I conse on laws and r ng officer of ents, whether	nt to checkag regulations. I any change in it be the gai	ge against my pay for will immediately the number and/or	hereon or obtaine application, to my	ed as a result y claimed dep for the prope	of the proces pendents or c er adjudicatio	pase of any information ssing/adjudication of this sustodians thereof, to the n of benefits, entitlements dependents.			
			23 45 6789		SGT						
SECTION 7			(Signature of	Marine)	(Social S	ecurity Number	-)	(Grade)			
SEC	Subscribed and sworn before me this 10 day of June 01										
	D		of attesting officer)								
	Document Vie	ew ed (====		all documents view	1. J. 31		CWO2, USMC, PERSO ype Name grade of attesting officer)				
	FOR USE BY COMMAND AF		ORITY: ARDED TO CMC	FOR USE BY UNIT DIARY	CLERK:		FOR USE BY CMC APPROVING AUTHORITY:				
	X APPROVED AS CLAIMED	(CODE APPRO	MRP-1) FOR VAL FOR IDENT NUMBERS	REPORTED ON UNIT D	DIARY:						
	APPROVED FOR DEPENDENT	DEFEN	DENT NOMBERS	NO							
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АОТНОВТУ	APPROVED FOR			RUC							
ING	OUT OF WEDLOO ELIGIBILITY PER N P5512.11. CHEC	исо		ENTRIES REPORTED:							
SECTION 8 APPROV	CHILD RESIDES IN MEMBER S HOUSEHOLD (Recertify annually) No Court Order			(Ensure the pro- is recorded)	oper diary action	taken					
ισ	(Signature of	commanding of	ficer)	-							
		(Signature of commanding officer) JOHN A. MAY, MAJOR (Typed name and grade of commanding officer)									
	1STBN 6THMAR (Unit E	2DMARDIV Designation)	FMFLANT	_							

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Figure 1-15b - Sample Format for Death of a Dependent.

NAV (Sup	VMC 1 persede	109 esall ndw	22 (R I previo	PUCATION (1751) EV. 4-01) (EF) ous editions which a be used) 300		WHERE ADDITIONAL SPACE IS NECESSARY TO COMPLETE ITEMS, USE SEPARATE SHEET DATE OF APPLICATION		CHANGE IN DEPENDENTS (Check one) CHANGE IN DEPENDENTS CHANGE IN DEPENDENTS LOSS (EXPLAIN IN						
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N N	2													
	3													
SECTION 2	5													
ø	6													
NAIC	Furnish the following information concerning custodian of any dependent nan							e.						
SECTION 3 CUSTODIAN INFORMATION	DEP NO			FULL NAME OF CU	STODIAN		RELATION DEPEN			AD	DRESS AND ZIP	CODE		
SECTION	1	AL(ONZO	DEAN MARINE			BROT			E AS ABOV				
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SECTION 4 N	X	YE	ES .	IF YES, STATE DATE ANI	D PLACE (cou	nty and state) V	/HERE SUCH ORDER/	/AGREEMENT WA	AS ISSUED A	ND ATTACH A	COPY.			
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Figure 1-16a - Sample Format for Ward.

NAV	VMC 10922 (Rev	/. 4-01)	(EF) Page 2			NAME OF MARINE MARINE, ALC						
JRAL PARENT OF MED FORCES	NO LE VE			OF CHILD(REN) LISTED EVE				e, branch of				
SECTION 5 NATURAL PARENT CHILD IN ARMED FORCES				ervice, and full name of child								
SECTION 6 SPOUSE IN ARMED FORCES	HAS YOUR SPOUSE	EVER BEE	N A MEMBER OF AN	Y U.S. ARMED FORCES?				_				
A ARM	YES. IF YES	S, COMPLI	ETE THE BLOCKS BE	LOW.								
USE	SSN	GRADE	TYPE OF SERVICE	BRANCH OF SERVICE	INCLUSIVEDA	TES OF ACTIVE SE	RVICE	ВАН				
6 SPC			REGULAR					WITH DEPENDENTS				
SECTION			RESERVE]	WITHOUT DEPENDENTS BAH DIFF				
CERTIFICATION	I CERTIFY that all ti knowledge and belie any allowances paid inform my command status of my dependents, or the	ef, and I d on laws ding offic dents, wh	ed as a result of ny claimed depen	the processing the processing the contract of	se of any information ing/adjudication of this stodians thereof, to the of benefits, entitlements lependents.							
CERTI					1	23 45 6789		SGT				
SECTION 7	_		(Signat ure of	f Marine)	(Social	Security Number)		(Grade)				
SECT	Subscribed and sworn before me this	1	0 day of	June 0	1							
			List and attach	all documents viewe	d)		and Title of atte	- '				
	Document Viewed (List and attach all documents viewed) T. J. STEWART, CWO2, USMC, PERSO (Type Name grade of attesting officer)											
	FOR USE BY COMMAND	APPROVING		FOR USE BY UNIT DIARY	CLERK:			APPROVING AUTHORITY:				
	APPROVED AS CLAIMED	X	FORWARDED TO CMC (CODE MRP-1) FOR APPROVAL FOR DEPENDENT NUMBERS	REPORTED ON UNIT D	NARY:							
	APPROVED FOR DEPENDENT	-	1	NO								
≱	NUMBERS:	_		DATED								
AUTHORITY	APPROVED FO OUT OF WEDL			RUC								
S _G	ELIGIBILITY PER P5512.11. CH			ENTRIES REPORTED:								
8 APPROVI	CHILD RESIDES IN MEMBER'S HOUSEHOLD		COURT									
SECTION	(Recertify annu No Court Orde	ıally) r										
<u> </u>	(Signature o	of commar	nding officer)	_								
	JOHN A. MAY,	MAJOR										
			ommanding officer)									
		R 2DMA t Designat	RDIV FMFLANT	_								

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Figure 1-16b - Sample Format for Ward.

CHAPTER 2 CHILDREN BORN OUT OF WEDLOCK

	PARAGRAPH	PAGE
AUTHORITY	2000	2-3
CHILD(REN) BORN OUT OF WEDLOCK TO MARINES	2001	2-3
CHILD (REN) BORN OUT OF WEDLOCK TO THE MARINE'S SPOUSE	2002	2-3
AMOUNTS OF BAH TO BE PROVIDED	2003	2-3
ELIGIBILITY FOR MEDICAL BENEFITS	2004	2-4
SUBMISSION AND FORWARDING OF THE DEPENDENCY APPLICATION, NAVMC FORM 10922	2005	2-4
CHECKLIST FOR SUBMITTING DEPENDENCY APPLICATION, (NAVMC FORM 10922) FOR DEPENDENT CHILDREN	2006	2-4
SAMPLE FORMATS FOR SUBMITTING DEPENDENCY APPLICATION (NAVMC FORM 10922) REGARDING DEPENDENT CHILDREN (CHILDREN BORN OUT OF WEDLOCK)	2007	2-5
FIGURE		
2-1 SAMPLE FORMAT FOR A DEPENDENT CHILD IN WHERE NEITHER THE MARINE FATHER NOR THE MOTHER IS/HAS BEEN MARRIED		2-6
2-2 SAMPLE FORMAT FOR A MARRIED MARINE WITH AUTHORIZED DEPENDENTS WHEN AN ADDITIONAL DEPENDENT CHILD IS ADDED WHO DOES NOT LIVE IN		
THE HOUSEHOLD MAINTAINED BY THE MARINE		2-8

	FIGURE	PAGE
2-3	SAMPLE FORMAT FOR A MARINE REQUESTING DEPENDENCY FOR A DEPENDENT CHILD WHO WAS BORN PRIOR TO THE MARINE'S ENTRY INTO THE MILITARY SERVICE	2-10
2-4	SAMPLE FORMAT FOR DEPENDENT CHILDREN AND EACH HAS A DIFFERENT MOTHER/CUSTODIAN	2-12
2-5	SAMPLE FORMAT FOR A DEPENDENT CHILD BORN OR CONCEIVED BY A WOMAN WHO IS MARRIED TO SOMEONE OTHER THAN THE MARINE	2-14

CHAPTER 2

CHILDREN BORN OUT OF WEDLOCK

2000. <u>AUTHORITY</u>. A NAVMC Form 10922 for children born out of wedlock prior to 26 November 1993, must be forwarded to the CMC (MRP-1) for a determination. If the Marine is claiming children with the effective entitlement date prior to 26 November 1993, the NAVMC Form 10922 must be submitted to the CMC (MRP-1) for determination and/or approval, along with all supporting documentation. Commanding officers have the authority to approve dependency applications for dependent children claimed on or after 26 November 1993, providing all supporting documents have been viewed. An approved copy of the NAVMC Form 10922, along with all supporting documentation, will be forwarded to the CMC (MRP-1) for review.

2001. CHILD (REN) BORN OUT OF WEDLOCK TO MARINES

- 1. Dependent child(ren) born out of wedlock to a Marine may be claimed from the date support commenced.
- 2. If the child's mother was married at the time of conception or birth, the child is considered of that marriage. To claim the child for BAH, a copy of a United States civil court ruling must be attached to the dependency application stating that the Marine is the natural father of the child, or that the husband of the child's mother is not the natural father. A divorce decree that indicates the child was not a result of that marriage is also acceptable.
- 2002. CHILD(REN) BORN OUT OF WEDLOCK TO THE MARINE'S SPOUSE. When the Marine is not the natural parent of a child(ren), they may be claimed from the date of the marriage to the Marine or the date the Marine entered active duty, whichever is later. This child is considered a stepchild(ren), and should be processed as indicated in paragraph 1003.3.
- 2003. AMOUNTS OF BAH TO BE PROVIDED. Effective 5 December 1991, Public Law 102-109 limits the amount of BAH paid to a member whose entitlement is based solely on payment of child support.
- 1. Personnel who reside in single-type Government housing (barracks) will be entitled to the BAH-DIFF only, provided the Marine is paying child support equal to at least the amount of BAH DIFF, per ref (a).

- 2. Personnel authorized to reside off base (on the economy) will be entitled to BAH-DIFF along with BAH Own-Right (BAH O/R) without dependent.
- 2004. <u>ELIGIBILITY FOR MEDICAL BENEFITS</u>. A DD Form 1173 is the authorized ID card to be issued to a child(ren) born out of wedlock, provided the Marine has taken the child into his/her household and has assumed financial responsibility for the child by furnishing more than 50 percent of the child's support, or the Marine has been judicially determined to be the child's natural parent. A child without a court order who leaves the household is no longer entitled to medical benefits, effective the date of departure.

2005. SUBMISSION AND FORWARDING OF THE DEPENDENCY APPLICATION, NAVMC FORM 10922

- 1. When submitting a NAVMC Form 10922 for determination on behalf of dependent children to the CMC (MRP-1), the following documentation must be attached:
- a. certified copy of the public record or the child's birth certificate;
- b. a notarized Children's Dependency Determination Affidavit, NAVMC Form 11346, completed by the child's physical custodian, or a notarized statement attesting to the amount of support and the dates received;
- c. a statement made and signed by the Marine, as to whether the member is the natural father (male Marines only); and
- d. certified copies of all legal and court documents pertaining to the paternity and/or support of the child(ren).
- 2. Processing and filing of the dependency application will be handled as previously described in paragraph 1004 of this Manual.
- 2006. CHECKLIST FOR SUBMITTING DEPENDENCY APPLICATIONS (NAVMC FORM 10922) FOR DEPENDENT CHILDREN. See chapter 1, figure 1-2, for the checklist to be used for the type of dependency application covered in this chapter. Those responsible for the delivery of recruits to the Marine Corps recruit depots should also use the checklist to ensure recruits with dependents have all the required documentation with them when reporting to recruit training.

2007. SAMPLE FORMATS FOR SUBMITTING DEPENDENCY APPLICATION (NAVMC FORM 10922) REGARDING DEPENDENT CHILDREN (CHILDREN BORN OUT OF WEDLOCK). Figures 2-1 through 2-5 are examples to be used as additional guides in the preparation of dependency applications.

NA\ (Sup	DEPENDENCY APPLICATION (1751) NAVMC 10922 (REV. 4-01) (EF) (Supersedes all previous editions which are obsolete and will not be used) SN: 0109-LF-984-9800						INSTRUCTIONS WHERE ADDITIONAL SPACE IS NECESSARY TO COMPLETE ITEMS, USE SEPARATE SHEET DATE OF APPLICATION				CHANGE IN DEPENDENTS (Check one) CHANGE IN DEPENDENTS						G
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	FUTUI	READD	RESS	AND ETA IF TRANSFE	RISANTICI	PATED WI	THIN (0 DAYS	ECC	0406	512			ST DISCHARGE C DUTY	ST DISCHARGE OR DATE OF LAST RELEADUTY		
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DEPENDENT INFORMATION	1	JILL	EL	ISE CASSELL		3 FOURTH ST CKSONVILLE NC 28540				DEPENDENT DAUGHTER			08062000	20	0010	608	
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DEPEN	3																
SECTION 2	4																
SECT	5																
	6																
ODIAN	Furnis	sh the fo	llow i	ng information concerni	ng cus todiar	of any de	epe nde	ent named above) .								
SECTION 3 CUSTODIAN INFORMATION	DEP NO			FULL NAME OF CU	STODIAN	DDIAN RELATIONSH DEPENDEN							ADI	DRESS AND ZIE	CODE		
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N ON				Γ MARRIED					BELOW.					', GIVE INFORM			
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Figure 2-1a - Sample Format of a NAVMC Form 10922 for a Dependent Child Where Neither the Marine Father Nor the Mother Is/Has Been Married.

NA۱	/MC 10922 (Rev. 4-01) (EF) Page 2			F MARINE (Last, firs IE, ALONZO DE	
ARENT OF ORCES	HAS NATURAL PARENT OTHER THAN CLAIMANT OF NO	CHILD(REN) LISTED EVE	ER BEEN A MEMBER OF ANY U	J.S. ARMED FORCES	5?
SECTION 5 NATURAL PARENT CHILD IN ARMED FORCES	YES IF YES, LIST ALL AVAILABLE IDENT I service, inclusive dates of active servi			N, grade, type of sen	vice, branch of
6 SPOUSE IN ARMED FORCES	HAS YOUR SPOUSE EVER BEEN A MEMBER OF ANY U NO YES IF YES, COMPLETE THE BLOCKS BELO				
SEINA	120		T		
spous	SSN GRADE TYPE OF SERVICE E	BRANCH OF SERVICE	INCLUSIVE DATES OF A	CTIVESERVICE	BAH WITH DEPENDENTS
SECTION 6	REGULAR RESERVE				WITHOUT DEPENDENTS BAH DIFF
CERTIFICATION	I CERTIFY that all the above statements are true knowledge and belief, and I consent to checkage any allowances paid on laws and regulations. I vinform my commanding officer of any change in status of my dependents, whether it be the gain dependents, or the loss of dependents.	against my pay for vill immediately the number and/or	application, to my claime	result of the proce ad dependents or o proper adjudication	essing/adjudication of this custodians thereof, to the on of benefits, entitlements
ERTIF			123 45 67	180	CCT
	(Signature of M	larine)	(Social Security N		SGT (Grade)
SECTION 7	Subscribed and sworn 10 day of	June 0		,	` ,
	X Document Viewed			(Signature and Title of T, CWO2, USMC (Type Name grade of a	C, PERSO
	FOR USE BY COMMAND APPROVING AUTHORITY:	FOR USE BY UNIT DIARY	CLERK:		MC APPROVING AUTHORITY:
	APPROVED AS CLAIMED FORWARDED TO CMC (CODE MIP-1) FOR APPROVAL FOR DEPENDENT NUMBERS	REPORTED ON UNIT D	NARY:		
	APPROVED FOR DEPENDENT NUMBERS:	NO			
≽		DATED			
ING AUTHORITY	APPROVED FOR CHILD BORN OUT OF WEDLOCK FOR DEERS	RUC			
≥	ELIGIBILITY PER MCO P5512.11. CHECK ONE CHILD	ENTRIES REPORTED:			
8 APPRO	RESIDES IN COURT ORDER				
SECTION	(Recertify annually) No Court Order				
0,	(Signature of commanding officer)				
	JOHN A. MAY, MAJOR				
	(Typed name and grade of commanding officer)	•			
	1STBN 6THMAR 2DMARDIV FMFLANT				
	(Unit Designation)				
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Figure 2-1b - Sample Format of a NAVMC Form 10922 for a Dependent Child Where Neither the Marine Father Nor the Mother Is/Has Been

Married.

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	NO.			OF DEPENDENT de full given name)		COMPLE (Includ				(if child,	ELATIO indicate : born ou	step,	adopte	d, ,	DATE OF BIRTH (Day, Mo., Year)		DATE ALLOWANG CLAIMED FROM (previously approved give date of approve	
DEPENDENT INFORMATION	1	TON	YA (CAROL MARINE		3 FOURTH ST ACKSONVILLE NC 28540				SPOUSE					07071977		Prev 19980814	
DENT INFO	2	JILL	ELIS	SE CASSELL		T STREE				EPENI AUGE			_	08062000	20	0010	508	
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SECTION 2	5													+				
Ø	6				-									+				
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SECTION 3 CUSTODIAN INFORMATION	DEP NO			FULL NAME OF CU	STODIAN		RELATIONSHIP TO DEPENDENT			то				ADDF	RESS AND ZIF	CODE		
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Designed Using FormFlow 2.22, HQMC/ARSE, Apr 01

Figure 2-2a - Sample Format of a NAVMC Form 10922 for a Married Marine with Authorized Dependents When an Additional Dependent Child Is Added, and Who Does Not Live in the Household Maintained by the Marine.

NAV	VMC 10922 (Rev	/. 4-01)	(EF) Page 2			NAME OF MARIN MARINE, AL	NE (Last, first ONZO DE	, middle) AN			
SECTION 5 NATURAL PARENT OF CHILD IN ARMED FORCES	NO YES IF YE	S, LIST A	LL AVAILABLEIDE	OF CHILD (REN) LISTED EVEN NTIFYING INFORMATION (Fervice, and full name of child	Full name of natural p						
SECTION 5 N.					()						
N ARMED FORCES	NO NO		N A MEMBER OF AN	Y U.S. ARMED FORCES?							
USEII	SSN	GRADE	TYPE OF SERVICE	BRANCH OF SERVICE	INCLUSIVEDA	TES OF ACTIVES	ERVICE	BAH			
SPO								WITH DEPENDENTS			
SECTION 6 SPOUSE IN ARMED			RESERVE					WITHOUT DEPENDENTS BAH DIFF			
SECTION 7 CERTIFICATION	I CERTIFY that all t knowledge and belia any allowances paid inform my command status of my dependents, or the	f the proces indents or c adjudication	ease of any information sing/adjudication of this ustodians thereof, to the n of benefits, entitlements dependents.								
CERTI					1	23 45 6789		SGT			
0N 7			(Signature o	of Marine)	(Social	Security Number)		(Grade)			
SECTI	Subscribed and sworn before me this	1	0 day of	June 0	1						
							nature and Title of attesting officer)				
	Document v	V iew ed	(List and attach	all documents viewe	d) <u>T. J. S</u>		CWO2, USMC, PERSO e Name grade of attesting officer)				
	FOR USE BY COMMAND	APPROVIN	G AUTHORITY:	FOR USE BY UNIT DIARY	CLERK:			MC APPROVING AUTHORITY:			
	APPROVED AS CLAIMED		FORWARDED TO CMG (CODE MRP-1) FOR APPROVAL FOR DEPENDENT NUMBER	REPORTED ON UNIT D	DIARY:						
	APPROVED FOR DEPENDENT NUMBERS:	-	DELENBERT NOMBER	NO							
ΑTΑ	- NOWBERG	_		DATED							
<u> </u>	APPROVED FO			RUC							
PPROVING AUTHORITY	OUT OF WEDLE ELIGIBILITY PEI P5512.11. CH	RMCO	EERS	ENTRIES REPORTED:							
SECTION 8 APPR	CHILD RESIDES IN MEMBER S HOUSEHOLD (Recertify annu No Court Orde	ually)	COURT	(Ensure the propies recorded)	per diary action	taken					
U)	(Signature of	of commar	nding officer)	_							
	JOHN A. MAY,	MAIOR	!								
			ommanding officer)								
		R 2DMA t Designat	RDIV FMFLANT	· ·							

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Figure 2-2b - Sample Format of a NAVMC Form 10922 for a Married Marine with Authorized Dependents When an Additional Dependent Child Is Added, and Who Does Not Live in the Household Maintained by the Marine.

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O	DATE OF BIRTI (Day, Mo., Year) 08061998 DDRESS AND ZIF DVE DP PREVIOUSL OF NO SS", GIVE INFORM ntinue on separate	DATE OF BIRTH (Day, Mo., Year) DATE ALLC CLAIMED previously a give date of D8061998 20010 DORESS AND ZIP CODE DYE DY HAS PRESENT SPOUSE BEEN PREVIOUSLY MARRIED? OF IES NO YES S*, GIVE INFORMATION REQUE Intinue on separate sheet if necess REASON (Check or DEATH ANNULMENT)		

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Designed Using FormFlow 2.22, HQMC/ARSE, Apr 01

Figure 2-3a - Sample Format of a NAVMC Form 10922 for a Marine Requesting Dependency for a Dependent Child Who Was Born Prior to the Marine's Entry Into Military Service.

NAV	VMC 10922 (Rev. 4-01) (EF) Page 2		NAME OF MARINE (I MARINE, ALON	Last, first, middle) IZO DEAN
L PARENT OF D FORCES	HAS NATURAL PARENT OTHER THAN CLAIMANT OF NO	CHILD(REN) LISTED EVE	ER BEEN A MEMBER OF ANY U.S. ARMED	FORCES?
SECTION 5 NATURAL PARENT CHILD IN ARMED FORCES	YES IF YES, LIST ALL AVAILABLE IDENTIF		Full name of natural parent, SSN, grade, typ ((ren).	e of service, branch of
FORCES	HAS YOUR SPOUSE EVER BEEN A MEMBER OF ANY U	.S. ARMED FORCES?		_
	NO YES, IF YES, COMPLETE THE BLOCKS BELOV	Α		
SEINA			INOLUGIVE DATES OF A STIVE SED.	WOS DALL
SPOU	SSN GRADE TYPE OF SERVICE B	RANCH OF SERVICE	INCLUSIVE DATES OF ACTIVE SERV	VICE BAH WITH DEPENDENTS
SECTION 6 SPOUSE IN ARMED	REGULAR RESERVE			WITHOUT DEPENDENTS BAH DIFF
SECTION 7 CERTIFICATION	I CERTIFY that all the above statements are true knowledge and belief, and I consent to checkage any allowances paid on laws and regulations. I winform my commanding officer of any change in t status of my dependents, whether it be the gain of dependents, or the loss of dependents.	against my pay for vill immediately the number and/or	By signing this form, I hereby author hereon or obtained as a result of the application, to my claimed dependent extent necessary for the proper adjund/or of my legal obligation to support the proper adjund/or of my legal obligation to support the proper adjund/or of my legal obligation to support the proper adjund/or of my legal obligation to support the proper adjund/or of my legal obligation to support the property of the p	e processing/adjudication of this ents or custodians thereof, to the udication of benefits, entitlements
CERTIF		123 45 6789	PFC	
ON 7	(Signature of M	(Social Security Number)	(Grade)	
SECTI	Subscribed and sworn 10 day of	June 0		
	Document Viewed (List and attach all	4		d Title of attesting officer)
	(Eist and attach an		(Type Name	grade of attesting officer)
	FOR USE BY COMMAND APPROVING AUTHORITY: FORWARDED TO CMC APPROVED AS CLAIMED CLAIMED CLAIMED	FOR USE BY UNIT DIARY REPORTED ON UNIT D		USE BY CMC APPROVING AUTHORITY:
	APPROVED FOR 1 DEPENDENT	NO		
	NUMBERS:	DATED		
ROVING AUTHORITY	APPROVED FOR CHILD BORN OUT OF WEDLOCK FOR DEERS	RUC		
ROVING,	ELIGIBILITY PER MCO P5512.11. CHECK ONE	ENTRIES REPORTED:		
8 APP	RESIDES IN MEMBER'S HOUSEHOLD COURT ORDER			
SECTION 8	(Recertify annually) No Court Order			
SB	(Signature of commanding officer)			
	JOHN A. MAY, MAJOR			
	(Typed name and grade of commanding officer)			
	1STBN 6THMAR 2DMARDIV FMFLANT (Unit Designation)			
ORIO	GINAL		Designed Us	sing FormFlow 2.22, HQMC/ARSE, May 01

Figure 2-3b - Sample Format of a NAVMC Form 10922 for a Marine Requesting Dependency for a Dependent Child Who Was Born Prior to the Marine's Entry Into Military Service.

NA\ (Sup	/MC eræd	109 es all	22 (Ri previo	PUCATION (1751) EV. 4-01) (EF) ous editions which a be used)		INSTRUCTIONS WHERE ADDITIONAL SPACE IS NECESSARY TO COMPLETE ITEMS, USE SEPARATE SHEET				REASON FOR THIS APPLICATION (CHECK ONE) CHANGE IN DEPENDENTS						
			984-98			DATE OF AF	PLICATION				CHA	(Check one) ANGE IN DEPEN	DENTS			
							20010609			TART		OSS (EXPLAIN CERTIFICATION		X	GAIN	
				E(Last, first, middle) NZO DEAN		SSN	123 45 67	189	GRADE SGT	1 -	YPE OF S	USMC		US	MCR	
SECTION 1. NTIFICATION	l			AND STATION PREPARI MARINES 2D MAR				UNIT	RUC	DATE	REPORTIN	RENT ENLISTMENT/APPOINTMENT OR ING FOR ACTIVE DUTY (WHICHEVER IS				
SECTI				JNE NC 28547					12160	LATER		20010613				
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	NO.			E OF DEPENDENT ude full given name)		COMPLETE (Include 2		(if ch	RELATIONS ild, indicate ste d or born out o	ep, adopt	iea, ,n	ATE OF BIRTH Day, Mo., Year)	DATE A CLAIN previou give da	ısly app	VANCE ROM (If proved, oproval)	
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SECTION 2 E	4															
SECT	5															
	6															
ODIAN	Furnis	sh the	follow in	ng information concerni	ng cus todiar	of any deper	ident named above	9 .								
SECTION 3 CUSTODIAN INFORMATION	DEP NO			FULL NAME OF CU	STODIAN		RELATION DEPENI				ADDR	ESS AND ZIP	CODE			
SECTIO	1 2	TO! HE	NYA C	CAROL GRAY R FAY CASSELL		MOTHER MOTHER			SAM SAM	E AS A	ABOVE ABOVE	E E				
NOIL			IN	IFORMATION CONCER	NING PRESE	NT MARRIAG	E	HAVE YOU	BEEN PREVIOU	EEN PREVIOUSLY MARRIED?			PREVIOUSLY MARRIED?			
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AND IN	INFO	RMAT		MARRIED	ION OF FAC	CH FORMER M	ARRIAGE OF BOT	BELOW.				GIVE INFORM.				
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BMBER AND SPOUSE AND INFORMATION RT/PATERNITY	YOUR	R- s	POUSE	THE DISSOLVED M	ARRIAGE	DISSOLUTIO	DN	(Count	y and State)			DEATH	ANNULM	ENT [DIVORCE	
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4 MARITAL STATUS OF SERVICE I REGARDING SUPP																
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M ARIT	IS THE	RE A C		ORDER OR WRITTEN AGRE	EMENT IN EFFI	ECT RELATIVE T	O SUPPORT/MAINTE	NANCE/PATE	RNITY?							
SECTION 4	X	YE		IF YES, STATE DATE AND EPN #1: 20010530	,				WAS ISSUED A	AND ATT	ACH A CO	OPY.				
	GINAI			EPN #1: 20010530 EPN #2: 20010416					(DA			ORDERS FI		/A DOT	. Apr 04	

Figure 2-4a - Sample Format of a NAVMC Form 10922 for Dependent Children and Each has a Different Mother/Custodian.

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NAV	VMC 10922 (Rev	/. 4-01)	(EF) Page 2			NAME OF MARINE (Last, firs MARINE, ALONZO DE	st, middle) EAN				
ARENT OF	HAS NATURAL PARE	NT OTHER	THAN CLAIMANT	OF CHILD(REN) LISTED EVE	er been a member	OF ANY U.S. ARMED FORCE	S?				
SECTION 5 NATURAL PARENT CHILD IN ARMED FORCES	YES serv	ice, inclusi	ve dates of active se	NTIFYING INFORMATION (Fervice, and full name of child 154321, CPL, U.S. ARM	(ren).	arent, SSN, grade, type of ser JILL ELISE GRAY	vice, branch of				
FORCES		EVER BEEN	A MEMBER OF AN	Y U.S. ARMED FORCES?							
ARMED F	YES. IF YES	S. COMPLE	ETE THE BLOCKS BE	LOW.							
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SECTION 6 SPC			REGULAR RESERVE				WITH DEPENDENTS WITHOUT DEPENDENTS BAH DIFF				
SECTION 7 CERTIFICATION	knowledge and belie any allowances paid	ef, and I d on laws ding offic dents, wh	consent to checka and regulations. er of any change lether it be the ga	in the number and/or	hereon or obtain application, to n extent necessary	ny claimed dependents or	essing/adjudication of this custodians thereof, to the on of benefits, entitlements				
CERTIFI			23 45 6789	SGT							
10N 7	_		(Signat ure o	f Marine)	(Social	Security Number)	(Grade)				
SECT	Subscribed and sworn before me this	1	0 day of	June 01	I						
	X Document \	√iew ed	(List and attac	h all documents view	red) T. J.	(Signature and Title of STEWART, CWO2, USM	-				
						(Type Name grade of	pe Name grade of attesting officer)				
	FOR USE BY COMMAND APPROVED AS CLAIMED		GAUTHORITY: FORWARDED TO CMC (CODE MRP-1) FOR APPROVAL FOR DEPENDENT NUMBER	REPORTED ON UNIT D		FOR USE BY C	CMC APPROVING AUTHORITY:				
	APPROVED FOR DEPENDENT NUMBERS:	_	1 & 2	No							
≱		_		DATED							
AUTHORITY	APPROVED FO OUT OF WEDL			RUC							
S N	ELIGIBILITY PER P5512.11. CH			ENTRIES REPORTED:							
8 APPROV	CHILD RESIDES IN MEMBER'S HOUSEHOLD		COURT								
SECTION	(Recertify annu No Court Orde										
S	(Signature o	of comman	ding officer)	_							
	JOHN A. MAY,	MAJOR									
	(Typed name and	grade of co	ommanding officer)								
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Figure 2-4b - Sample Format of a NAVMC Form 10922 for Dependent Children and Each Has a Different Mother/Custodian.

NA\ (Sup	/MC 1 erædes	0922 (R s all previ	PUCATION (1751) REV. 4-01) (EF) ous editions which at be used)		INSTRUCTIONS WHERE ADDITIONAL SPACE IS NECESSARY TO COMPLETE ITEMS, USE SEPARATE SHEET				REASON FOR THIS APPLICATION (CHECK ONE) CHANGE IN DEPENDENTS						
		LF-984-9			DATE OF AF	20010609		\times	STA	ART	CHA	(Check one) ANGE IN DEPEN OSS (EXPLAIN CERTIFICATION	IN	X G	AIN
			E (Last, first, middle)		SSN			GRAI		T	PE OF S	SERVICE			
. z			ONZO DEAN AND STATION PREPAR	ING THIS A	DI ICATION	123 45 67	UNIT RU	_	SGT 	DATE		USMC	IT/APPOINT	USM (
SECTION 1.	1ST	BN 6TH	MARINES 2D MAR UNE NC 28547					2160 DATE REPORTI			REPORTIN	RRENT ENLISTMENT/APPOINTMENT OR RITING FOR ACTIVE DUTY (WHICHEVER IS 000613			
	FUTURE	ADDRESS	S AND ETA IF TRANSFE	RISANTICI	CIPATED WITHIN 60 DAYS			DATE OF LAST TO INACTIVE 040612				DISCHARGE OF UTY	R DATE OF L	AST RELE	ASE
	NO.		IE OF DEPENDENT ude full given name)		COMPLETE ADDRESS (Include Zip Code)							DATE OF BIRTH CLAI (Dav. Mo Year) previo		LLOWAN ED FROM sly approve e of appro	1 (If ed,
DEPENDENT INFORMATION	1	JILL EL	ISE CASSELL	123 FO JACK	3 FOURTH ST CKSONVILLE NC 28540			DEPENDENT DAUGHTER				08062000	20	010608	
AT INFO	2														
PENDE	3														
	4														
SECTION 2	5														
	6														
ODIAN	Furnish	the follow	ing information concern	ing cus todiar	of any depen	ndent named above	3 .								
SECTION 3 CUSTODIAN INFORMATION	DEP NO		FULL NAME OF CU	STODIAN		RELATION DEPENI					ADDR	ESS AND ZIP	CODE		
	1	TONY	A CAROL CASSEL	L		HER				BOVE					
TION		II.	NFORMATION CONCER	NING PRESE	NT MARRIAG	HAVE YOU BE	/E YOU BEEN PREVIOUSLY MARRIED?				PREVIOUSLY MARRIED?			10 OF	
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MARITAL STATUS OF SERVIC REGARDING SU	IS THERE	A COURT (LORDER OR WRITTEN AGRE	EMENT IN EFF	L ECT RELATIVE T	O SUPPORT/MAINTE	NANCE/PATERN	ITY?				1			
4	X	YES	IF YES, STATE DATE AN	D PLACE (cou	nty and state) W	HERE SUCH ORDER/	AGREEMENT WA	AS ISSU	ED AN	ID ATT	ACH A CO	OPY.			
SECTION		2	0010608 ONSLOW	COUNTY	NORTH CA	ROLINA (DA	ΓΕ COURT (ORDI	ER FI	ILED)				
OBI	SINAI								D	esigne	ed Using	FormFlow 2.2	2, HQMC/	ARSE, A	pr 01

Figure 2-5a - Sample format of a NAVMC Form 10922 for a Dependent Child Born or Conceived by a Woman Who is Married to Someone Other Than the Marine.

ORIGINAL

NAV	NAVMC 10922 (Rev. 4-01) (EF) Page 2						RINE (Last, first, middle) LONZO DEAN		
ORCES	HAS NATURAL PARENT OTHER THAN CLAIMANT OF CHILD(REN) LISTED EVER BEEN A MEMBER OF ANY U.S. ARMED FORCES? NO								
SECTION 5 NATURAL PARENT CHILD IN ARMED FORCES	YES IF YES, LIST ALL AVAILABLE IDENT IFYING INFORMATION (Full name of natural parent, SSN, grade, type of service, branch of service, inclusive dates of active service, and full name of child(ren).								
ARMED FORCES	HAS YOUR SPOUSE EVER BEEN A MEMBER OF ANY U.S. ARMED FORCES? NO YES, IF YES, COMPLETE THE BLOCKS BELOW.								
USEIN	SSN GRADE	TYPE OF SERVICE	BRANCH OF SERVICE	BRANCH OF SERVICE INCLUSIVE DATES OF A			BAH		
ECTION 6 SPOUSE IN ARMED		REGULAR					WITH DEPENDENTS WITHOUT DEPENDENTS		
SECT		RESERVE					BAH DIFF		
CERTIFICATION	I CERTIFY that all the above statements are true to the best of my knowledge and belief, and I consent to checkage against my pay for any allowances paid on laws and regulations. I will immediately inform my commanding officer of any change in the number and/or status of my dependents, whether it be the gain of additional dependents, or the loss of dependents.								
	123 45 6789						SGT		
SECTION 7	(Signature of Marine) (Social Security Number) (Grade) Subscribed and sworn 10 day of June 01								
	Delote file this			(Signature and Title of attesting officer)					
	Document Viewed (List and attach all documents viewed) T. J. STEWA					T, CWO2, USMC,PERSO			
	FOR USE BY COMMAND APPROVING	2 ALITHORITY	FOR LISE BY LIMIT DIABY	(Type USE BY UNIT DIARY CLERK:			FOR USE BY CMC APPROVING AUTHORITY:		
	APPROVED AS CLAIMED		REPORTED ON UNIT DIARY:			S ATTIOVING ACTION 11.			
	APPROVED FOR DEPENDENT	NO							
ING AUTHORITY	NUMBERS:		DATED						
	APPROVED FOR CHILD BO OUT OF WEDLOCK FOR D		RUC						
Š	P5512.11. CHECK ONE CHILD		ENTRIES REPORTED:						
8 APPI	RESIDES IN MEMBER'S HOUSEHOLD	COURT							
SECTION	(Recertify annually) No Court Order								
Ø	(Signature of comman	nding officer)	_						
		-							
	JOHN A. MAY, MAJOR (Typed name and grade of co	_							
	1STBN 6THMAR 2DMAl (Unit Designat	-							

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Figure 2-5b - Sample format of a NAVMC Form 10922 for a Dependent Child Born or Conceived by a Woman Who is Married to Someone Other Than the Marine.

CHAPTER 3 PARENTS/PARENTS-IN-LAW/STEPPARENTS/ADOPTIVE PARENTS/IN LOCO PARENTIS

		PARAGRAPH	PAGE	
GENERAL	INFORMATION	3000	3-3	
	FOR PARENTS/PARENTS-IN-LAW/STEPPARENTS/ E PARENTS	3001	3-3	
REQUIRED PREREQUISITES				
DEPENDENCY FACTORS				
IN LOCC	PARENTIS STATUS	3004	3-4	
ANNUAL REVIEW FOR DEPENDENCY OF PARENTS/PARENTS-IN-LAW/ STEPPARENTS/ADOPTIVE PARENTS/IN LOCO PARENTIS 3005				
CHECKLIST FOR SUBMITTING NAVMC FORM 10922				
	FIGURE			
3-1	DEPENDENCY STATEMENT - PARENT, DD FORM 137-3		3-6	
3-2	IN LOCO PARENTIS AFFIDAVIT		3-11	
3-3	CHECKLIST FOR SUBMITTING A DEPENDENCY APPLICATION, NAVMC FORM 10922 FOR PARENTS		3-11	
3-4	A DEPENDENCY APPLICATION, NAVMC FORM 10922 SUBMITTED FOR CLAIMING A MOTHER AS A		3-13	
	DEPENDENT		2-13	

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CHAPTER 3

PARENTS/PARENTS-IN-LAW/STEPPARENTS/ADOPTIVE PARENTS/IN LOCO PARENTIS

- 3000. GENERAL INFORMATION. Only the CMC (MRP-1) can determine the dependency involving parents, parents-in-law, stepparents, adoptive parents, or persons who stood "in loco parentis" for entitlement to BAH, travel, and transportation allowances.
- 3001. SUPPORT FOR PARENTS/PARENTS-IN-LAW/STEPPARENTS/ADOPTIVE PARENTS. There is no legal requirement for Marines to support their parents, parents-in-law, stepparents, or adoptive parents, although it is within the Marine's discretion to do so. No provision exists for the payment of BAH on behalf of parents or parents-in-law, unless the Marine requests it, and it is approved by the CMC (MRP-1).
- 3002. REQUIRED PREREQUISITES. The CMC (MRP-1) will determine if the Marine's parents, parents-in-law, stepparents, or adoptive parents meet the prerequisites required for approval of dependency. The commanding officer is responsible for ensuring that the Marine's application,

 NAVMC Form 10922, is submitted with a Dependency Statement Parent,

 DD Form 137-3 (figure 3-1), completed by the parents/parents-in-law, and notarized. Those persons who have stood in loco parentis must complete an In Loco Parentis Affidavit, figure 3-2, which may be produced locally. Approval will normally be granted if:
- 1. The parents, parents-in-law, stepparents, or adoptive parents, were dependent on the Marine for more than 50 percent of their monthly support prior to the Marine's entry on active duty.
- 2. If the parent was not dependent upon the Marine prior to the Marine's entry on active duty, a change of circumstances (i.e., loss of job, death of supporting spouse, etc.) must have occurred whereby the parent had become dependent on the Marine as the principal means of support. BAH will be approved from the date sufficient support was provided.
- 3. The parents', parents'-in-law, stepparents', or adoptive parents', income from sources other than the Marine's contribution is less than 50 percent of the natural parent's monthly expenses.
- 4. The support provided by the Marine is more than 50 percent of the parent's monthly expenses.

- 3003. <u>DEPENDENCY FACTORS</u>. When applying for BAH for dependent parents, parents-in-law, stepparents, or adoptive parents, the Marine should be aware of the following:
- 1. Unliquidated capital assets are not considered income, and parents are not required to deplete these assets as a condition of establishing dependency. However, proceeds derived from the assets (i.e., rent of property, operation of a business, dividends from stocks or bonds, etc.) are considered to be income.
- 2. Payments from Veterans Administration, social security, unemployment compensation, and pensions are considered as income.
- 3. A parent's residence in a charitable institution does not necessarily prevent the Marine from receiving BAH, provided other conditions are met.
- 4. Contributions from welfare, supplemental security income or other charitable organizations are considered as income.
- 5. A custodial or legal guardian may complete a Dependency Statement Parent, DD Form 137-3 (figure 3-1), for an incapacitated, hospitalized, or mentally incompetent parent.
- 6. If a parent dies before completing a DD137-3 (figure 3-1), payment of BAH may not be made on behalf of such parent.
- 3004. <u>IN LOCO PARENTIS STATUS</u>. Those parties who have stood "in loco parentis" for 5 continuous years, prior to the Marine's entry on active duty or attaining 21 years of age, must complete a DD Form 137-3 (figure 3-1), and an In Loco Parentis Affidavit (figure 3-2), and attach them to the Marine's Dependency Application NAVMC Form 10922, submitted to the CMC (MRP-1) for determination. A person who stood "in loco parentis" even though possibly approved for BAH purposes, is not an eligible dependent for an ID card authorizing any privileges.

3005. ANNUAL REVIEW FOR DEPENDENCY OF PARENTS/PARENTS-IN-LAW/STEP-PARENTS/ADOPTIVE PARENTS/IN LOCO PARENTIS.

1. The CMC (MRP-1) will annually correspond directly with the parent of the Marine who has been authorized BAH for the past year. The Marine will be provided an information copy of the annual redetermination letter to the parent. This annual review requires the parent complete a new DD Form 137-3 (figure 3-1), have it notarized, and return it to the CMC (MRP-1).

- 2. If upon review, it is discovered that the Marine is not providing support in an amount greater than 50 percent of the parent's expenses or that the income of the parent from sources other than the Marine is greater than 50 percent of the parent's expenses, BAH for the parent will be terminated. If the parent fails to furnish the affidavit within a 30-day period, BAH in behalf of the parent will be terminated.
- 3006. CHECKLIST FOR SUBMITTING NAVMC FORM 10922. Figure 3-3 is a checklist for the type of dependency applications covered in this chapter. It will be used by those responsible for the preparation and review of applications prior to forwarding them to CMC (MRP-1).

CONTROL NUMBER Form Approved **DEPENDENCY STATEMENT - PARENT** OMB No. 0730-0014 Expires May 31, 2004 The public reporting burden for this collection of information is estimated to average 1.25 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to Department of Defense, Washington Headquarters Services, Directorate for Information Operations and Reports (0730-0014), 1215 Jefferson Davis Highway, Suite 1204, Affington, VA 22202-4302. Respondents should be aware that notwithstanding any other provision of law, no person shall be subject to any penalty for failing to comply with a collection of information if it does not display a currently valid OMB control number. PLEASE DO NOT RETURN YOUR FORM TO THE ABOVE ADDRESS. RETURN COMPLETED FORM TO YOUR LOCAL SERVING PERSONNEL/PAYROLL OFFICE. PRIVACY ACT STATEMENT AUTHORITY: 37 U.S.C. Chapter 7; 10 U.S.C. Chapter 55; EO 9397, November 1943. PRINCIPAL PURPOSE: To obtain information to determine dependency upon service member. ROUTINE USE(S): Copies of the dependency statement, related correspondence, and information from either may be furnished to the FBI for law enforcement; the IRS and state and local taxing agencies for tax administration; the VA to determine entitlement and prevent duplication of payment; the Defense Finance and Accounting Service for final determination in appeal cases; welfare agencies to prevent duplication of payment; and the American Red Cross (ARC) for locator purposes and to aid in delinquent loans owed to ARC. DISCLOSURE: Voluntary; however, the SSN is used for positive identification and if the required information is not furnished, the member's application may be disapproved. INSTRUCTIONS The member must complete Items 1 and 2, and sign and date the form. Parent or parent(s) representative (if parent is unable to complete the form due to health or physical disability) must complete Items 3 through 12, sign and date the form, and have the form notarized. If a representative completes the form for the parent(s), include in the Remarks section the name of the individual, the relationship, and the reason the form was not completed by parent(s). If the member is deceased, information furnished must reflect the 12 months prior to member's death. NOTES: Answer all questions. If any question does not apply, write "NOT APPLICABLE" or "N/A" in that block. Use the Remarks section when required. Incomplete answers will delay final action on the application. Verification of all income is required. Proof of member's contribution is required when applying for Basic Allowance for Housing (BAH). Parent must be more than 50% dependent upon member. 1. ENTITLEMENTS REQUESTED (X and complete as applicable) c. LAST APPLICATION WAS a. TYPE b. FIRST APPLICATION? USIP CARD APPROVED BAH YES (If No, give date of last application) TRAVEL ALLOWANCE (YYYYMMDD) DISAPPROVED NO 2. MEMBER INFORMATION a. NAME (Last, First, Middle Initial) b. SSN c. RANK d. STATUS (X and complete as applicable) NATIONAL GUARD ACTIVEDUTY ARMY NAVY DECEASED (Date of death) (YYYYMMDD) RETIRED RESERVE MARINE CORPS AIR FORCE OTHER (Specify) e. COMPLETE RESIDENCE ADDRESS (Street, Apartment Number, City, State, ZIP Code) f. COMPLETE MILITARY ADDRESS (Include assignment: squadron and base) g. TELEPHONE NUMBERS (Include DSN or Area Code) h. E-MAIL ADDRESS i. MARITAL STATUS (X one) (1) WORK (2) HOME SINGLE SEPARATED WIDOWED DIVORCED MARRIED 3. PARENT(S) INFORMATION a. (1) NAME (Last, First, Middle Initial) b. (1) NAME (Last, First, Middle Initial)

DD FORM 137-3, MAY 2001

REPLACES DFAS-DE FORM 1868, FEB 1998 AND NAV MC FORM 11165, APR 1985, WHICH ARE OBSOLETE

(4) RELATIONSHIP

(2) SSN

Page 1 of 5 Pages

(3) DATE OF BIRTH (YYYYMMDD)

Figure 3-1A - Sample Dependency Statement - Parent, DD Form 137-3

(3) DATE OF BIRTH (YYYYMMDD)

(2) SSN

(4) RELATIONSHIP

3. PARENT(S) INFORMATION (Continued)									
a. (5) COMPLETE ADDRESS (S	treet, Apartment Numb	er, City, State, ZIP Co	de) b. (5) COMPL	b. (5) COMPLETE ADDRESS (Street, Apartment Number, City, State, ZIP Code)					
(6) TELEPHONE NUMBER (Include	le Area Code)		(6) TELEPHON	E NUMBER (Include Area Code)					
(7) PRESENT OCCUPATION OR	BUSINESS		(7) PRESENT (OCCUPATION OR BUSINESS					
(8) NAME AND ADDRESS OF E	MPLOYER (If unemploy	ed, state reason, date	(8) NAME AN	D ADDRESS OF EMPLOYER (If une	employed, state reason, date				
unemployment began, and da	te employment is expe	ected to resume.)	unemploym	unemployment began, and date employment is expected to resume.)					
- MARITAL OTATUO (V)			d IE SPOUSE	d. IF SPOUSE IS DECEASED OR LEGALLY SEPARATED FROM PARENT, GIVE					
c. MARITAL STATUS (X one)			I	DEATH, DIVORCE, OR SEPARATION	· ·				
MARRIED	DIVORCED		DAIL OI	DEATH, DIV ONCE, ON CE AIGHT	Sit (1111mm22)				
SINGLE	LIVING APART	UNDER LEGAL							
WIDOWED	SEPARATION								
e. IF PARENT AND SPOUSE LIV	E APART OR SPOUSE	DOES NOT SUPPORT	PARENT, GIVE REA	SON:					
f. CHILDREN (List all parent's li	ving children regardles:	s of age. Show the av	erage monthly contr	ibution to parent from each child.	Continue in Remarks section				
if more space is needed.)									
(1) N	AME		(2) SSN	(3) BRANCH OF SERVICE	(4) MONTHLY CONTRIBUTION				
(Last, First, I		(Servic	e Members Only)	(If on Active Duty)	TO PARENT				
a. DOES ANY OTHER CHILD CI	LAIM PARENT FOR RAI	H. TRAVEL ALLOWAN	CE. OR USIP CARD	? (If Yes, give child's name, SSN,	and branch of service.)				
YES		.,	,	(, , , , , , , , , , , , , , , , , ,					
NO									
4. PARENT'S RESIDENCE									
	l com ploto as applicable	2)							
a. TYPE OF RESIDENCE (X and		*) [v= (0, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,				
HOME OR APARTMENT OF			HOME OR AP	ARTMENT OF FRIEND OR RELATIV	VE(State relationship)				
HOME OR APARTMENT OF		Г							
(Date began residing with member)				HOSPITAL OR INSTITUTION					
			OTHER (Expla	OTHER (Explain)					
b. OWNER OF RESIDENCE									
(1) NAME (Last, First, Middle Ini	tial)	(2) ADDRESS (Street,	Apartment Number,	City, State, ZIP Code)					
c. IS RESIDENCE	d. DATE PARENT ST.	ARTED LIVING AT	e. IS CURRENT AD	DRESS PARENT'S PERMANENT A	DDRESS?				
CUPPENT ADDRESS (VVVVMMDD)				ES (If No, explain where else parent lives and number of months there each					
YES									
NO			NO						

DD FORM 137-3, MAY 2001

Page 2 of 5 Pages

Figure 3-1B - Sample Dependency Statement - Parent, DD Form 137-3

more space is needed.	h RFI	ATIONSHIP		d. MAR	RIED (X)	e.	EM PLOYE	, T	f. MONTHLY
a. NAME (Last, First, Middle	Initial)	PARENT C.	AGE	YES	NO NO		ER WEEK	NO (X)	CONTRIBUTION TO PARENT
HOUSEHOLD EXPENSES List the household expense				•					
show this as a monthly exper owned by the member, use F member, list actual mortgage obtained using the Remarks: FAIR RENTAL VALUE (FI can reasonably expect to rec are listed separately.	air Rental Value (FR\ e, rent, or FRV if dwe section. However, if RV): FRV is a single	for dwelling. If p Illing is mortgage-fre parent resides in ar monthly sum for the	arent e. If Indown	does not FRV is us as home e dwelling	reside ir sed, give mortgage g where	n member' a brief ex e free, ent the paren	s househo oplanation ter "None' t lives. T	old or in a of how Fa ' in mortga his sum is	dwelling owned by air Rental Value was age/rent/FRV block. an amount the owne
ITEM	PRESENT MONTHLY EXPENSE	(2) TOTAL EXPENSE FOR PAST 12 MONTHS			ITEM		PRESENT	(1) MONTHLY PENSE	(2) TOTAL EXPENSE FOR PAST 12 MONTHS
a. (X one) RENT MORTGAGE (Specify amount of tax and insurance if applicable)				d. FURNITURE AND APPLIANCES e. REPAIRS ON HOME f. OTHER (Itemize in Remarks					
TAX Insurance			e. I						
b. FOOD			f. C			emarks			
c. UTILITIES (Heat, power, water, and telephone)			s	section)					
7. PARENT'S PERSONAL EX List personal expenses fo household. Do not list persor expenses regardless of who i	r parent, parent's sponal expenses for the r							•	
ITEM	(1) PRESENT MONTHLY EX PENSE	(2) TOTAL EXPENSE FO PAST 12 MONTHS			ITEM		PRESENT	(1) MONTHLY PENSE	(2) TOTAL EXPENSE FOR PAST 12 MONTHS
a. CLOTHING				PRIVATE A	registered				
b. LAUNDRY AND DRY CLEANING			h. I	MONTHLY	TRANSF				
c. MEDICAL (Do not include expenses paid by insurance, welfare, or Medicare)				TION PAY gas, oil, in and public CHOOL E	surance, transport	repairs, ation)			
d. VALUE OF USIP CARD (Verification of amount is required)									
e. PERSONAL INSURANCE (Specify)			j. C	THER EX	PENSES (temize)			

DD FORM 137-3, MAY 2001

f. PERSONAL TAXES (Specify)

Page 3 of 5 Pages

Figure 3-1C - Sample Dependency Statement - Parent, DD Form 137-3

8. PARENT'S ASSETS List all assets such as real es of any type, stocks, bonds, etc., Assets must be listed even thougaccrue.	whether owned	separately by pare	nt, jointly with spouse, or j	ointly by pare	ent or spouse with	another person.
	a. DESCRIPTION		b. F	RESENT VALU	E c. PA	RENT'S EQUITY
d. IS PARENT LIQUIDATING ASSETS YES. IF YES, HOW MUCH OF F NO EXPLAIN: 9. PARENT'S INCOME	? (For example, is p	parent withdrawing m	oney from savings, or selling st			RENT'S EQUITY
All gross income received by yearly, must be listed. If any income parents and children separately. Verification documents are required.	come received inc If any income re	ludes funds for ch	ildren, be sure to show the	amount recei	ved for them. Li	st income for
SOURCE	(1) PRESENT MONTHLY INCOME	(2) TOTAL INCOME FOR PAST 12 MONTHS	SOURCE	PARENT/ CHILDREN	(1) PRESENT MONTHLY INCOME	(2) TOTAL INCOME FOR PAST 12 MONTHS
a. WAGES, SALARIES, TIPS, OR OTHER CASH GRATUITIES b. INTEREST ON INVESTMENTS,			i. SCHOLARSHIPS OR EDUCATIONAL GRANTS	Parent		
BONDS, SAVINGS, TRUST FUNDS, ETC.			EDUCATIONAL GRANTS	Children		
C. INSURANCE OR PUBLIC/ GOVERNMENT PENSION PAYMENTS, UNEMPLOYMENT OR DISABILITY COMPENSATION (Specify type)			j. SOCIAL SECURITY PAYMENTS, DISABILITY OR REGULAR	Parent		
(Specify type)			(Specify type)	Children		
d. NET INCOME FROM RENTAL PROPERTY, BUSINESS AND FARMING (Specify type and			k. SUPPLEMENTAL SECURITY INCOME (SSI)	Parent		
explain in Remarks section)				Children		
e. FOREIGN PENSION PAYMENTS (Specify type and if received based on previous employment,			I. VETERANS ADMINISTRATION PAYMENTS (Specify	Parent		
parent's need, age, military service, etc., in Remarks section)			type)	Children		
f. CONTRIBUTIONS FROM PERSONS OTHER THAN MEMBER			m. STATE OR LOCAL WELFARE AID, INCLUDING AID TO	Parent		
g. TAX REFUNDS (Specify)			DEPENDENT CHILDREN (Include agency and address in Remarks section)	Children		
h. OTHER (Specify)			n. PAYMENT OR ALIMONY FROM SEPARATED OR	Parent		
			DIVORCED SPOUSE	Children		
o. HAS PARENT OR SPOUSE APPLIEI YET RECEIVED? (If Yes, explain.) YES NO IF PARENT OR SPOUSE HAS REACHE	D THE ELIGIBILITY	AGE FOR SOCIAL SE		d widow or wid		

DD FORM 137-3, MAY 2001

Page 4 of 5 Pages

10. MEMBER'S CONTI	RIBUTION				
a. SHOW THE TOTAL A	MOUNT THE MEMBER GAV	E PARENT, OR PAID IN PA	RENT'S BEHALF FOR EAC	H OF THE PAST 12 MONTHS	
(1) MONTH AND YEAR	(2) AMOUNT	(1) MONTH AND YEAR	(2) AMOUNT	(1) MONTH AND YEAR	(2) AMOUNT
b. MEMBER PROVIDES S	UPPORT BY (X one)	ALLOTME	NT	PERSONAL CHECK	MONEY ORDER
(Verification documents	ation is required for BAH cla	ims) OTHER (Ex	plain)		
11. REMARKS (Use bac	k if necessary)				
	READ THE PENALTY	Provisions, Sign ani	D DATE THE FORM, A	ND HAVE IT NOTARIZED.	
NOTE: Whoever, in an	y matter within the juris	sdiction of any departme	nt or agency of the Un	ited States, knowingly and	willfully falsifies,
				fictitious, or fraudulent stat	
				, fictitious, or fraudulent s	
	i Title 18, or imprisoned red to the appropriate Mi			le 18, section 1001). The	information provided in
				ng a false claim. (U.S. Co	de. title 18. section
				e years and subject to a fir	
provided in this title.)					
12. SIGNATURES					
a. PARENT(S)					
l,		(print name	e) and		(print name)
will immediately r	actify the convine concer	nod of any obongoo in n	acidonay financial circ	imatanasa ar danandanay	unan tha mambar
will illillediately i	lotify the service concer	ned or any changes in it	esidency, imancial circ	umstances, or dependency	upon the member.
(1) PARENT'S SIGNATURE		(2) DATE SIGNED	(3) PARENT'S SIGNATU	JRE	(4) DATE SIGNED
		(YYYYMMDD)			(YYYYMMDD)
b. NOTARY PUBLIC		1	1		
	lly sworn (or affirmed) to	before me according to	o law by the above nam	ned affiant(s).	
This day of				, county of	
uu,	"	, at only (, Jounny of	
and state (or territory)	of				
and state (or territory)		·	-	(Notary)	
				, , , , ,	
(Official Seal)				(Official Title)	
(Official Seal)				(Official Title)	
				(Official Title)	
c. MEMBER					ED (YYYYMMDD)
					ED (YYYYMMDD)
c. MEMBER					ED (YYYYMMDD)

Figure 3-1E - Sample Dependency Statement - Parent, DD Form 137-3

IN LOCO PARENTIS AFFIDAVIT

Because you are not the natural parent of the Marine, it is necessary for you to answer the questions listed below in addition to those questions in the Dependency Statement - Parent (DD Form 137-3).

l,		do hereby swear (affirm) that:
1. 0	n or about theday of,,,,,,	came to
	n my home and continued to live with me until	······································
2. M	relationship to the Marine is	
3. D	ıring the period of time specified in paragraph 1, the Mari	ne was/was not (circle one) under my parental control.
4. T	e circumstances under which the Marine became a memb	er of my household under my custody are as follows:
	ne parents of the Marine are/are not (circle one) living. cained control over and responsibility for the Marine, in	- -
6. T	ne name and address of the Marine's natural parents, if	living:
	nm/am not (circle one) the legally appointed guardian of adoption or guardianship.)	of the Marine. (Submit a certified copy of the court
8. (l	se this space and back page for any additional informa	cion you may wish to submit.)
(Date) (Signature)	

CHECKLIST FOR SUBMISSION OF THE NAVMC FORM 10922 FOR PARENTS Has the completed and notarized Dependency Statement - Parent, DD Form 137-3 (figure 3-1), been attached to the application? Has the completed In Loco Parentis Affidavit (figure 3-2) been attached to the application? Has the Marine's parent(s)/parents-in-law completed the DD Form 137-3 (figure 3-1) and has the person(s) who stood in loco parentis also completed an In Loco Parentis Affidavit (figure 3-2)? Has the Marine been counseled concerning the prerequisites that must be met before a parent or person who stood in loco parentis (person(s) who acted in place of Marine's parent's for 5 continuous years while the Marine was under 21 years of age and prior to the Marine's entry on active duty), or parent-in-law can be determined an eligible dependent for BAH purposes? Have dependent ID cards been issued? If so, recover them. Parents/parents-in-law are not entitled to ID cards until the BAH is approved by the CMC (MRP-1). Have all the attached documents been mentioned in the Certification Section of the Dependency Application, NAVMC Form 10922? Has attesting officer viewed all the attached documents and signed the NAVMC Form 10922? Has the commanding officer signed the application and checked the appropriate box for the CMC (MRP-1) determination?

Figure 3-3 - Checklist for Submission of the NAVMC Form 10922 for Parents.

NA	DEPENDENCY APPLICATION (1751) NAVMC 10922 (REV. 4-01) (EF) (Supersedes all previous editions which are			INSTRUCTIONS WHERE ADDITIONAL SPACE IS NECESSARY TO COMPLETE ITEMS, USE SEPARATE SHEET			то	REASON FOR THIS APPLICATION (CHECK ONE)				G			
obso		nd will	not	be used)	ile	DATE OF AF		WIE SHEET		CHANGE IN (Chec			GE IN DEPEN (Check one)		
							20010609		[X st	ART		ANGE IN DEPEN LOSS (EXPLAIN CERTIFICATION	IN 🔽	GAIN
				(Last, first, middle) NZO DEAN		SSN		790	(GRADE SGT			SERVICE USMC		JSMCR
N - N	ORGAN	NIZATI	ON A	IND STATION PREPAR MARINES 2D MAR			123 43 0		T RUC		DATE	OF CUR	RENT ENLISTME	NT/APPOINTMEN E DUTY (WHICHE	IT OR
SECTION 1.				JNE NC 28547	CDIV FWIF	LANI			121	160	LATER		0006		
_	FUTUR	EADD	RESS	AND ETA IF TRANSFE	R IS ANTICI	PATED WITHI	N 60 DAYS	ECC	0406	12		OF LAST ACTIVE D		R DATE OF LAST	RELEASE
	NO.			E OF DEPENDENT de full given name)		COMPLETE (Include 2		(if c	RE hild, i	LATIONS ndicate ste born out o	p, adopt	ea, ,	ATE OF BIRTH Day, Mo., Year)	DATE ALLO CLAIMED previously a give date of	pproved,
DEPENDENT IN FORMATION	1	JILL	EL	ISE MARINE		OURTH ST SONVILLE	NC 28540		N	МОТНЕ	R		20021940	20010	0608
NT INFO	2														
EPENDE	3														
	4														
SECTION 2	5														
	6														
ODIAN	Furnish	the fo	llow in	ng information concern	ing cus todiar	n of any deper	ndent named above	e.				•		•	
3 CUST RMATIO	DEP NO			FULL NAME OF CU	STODIAN		RELATION DEPEN	ONSHIP TO ADDRESS AND ZIP CODE NOENT							
SECTION 3 CUSTODIAN INFORMATION															
			IN	FORMATION CONCER	NING PRESE	NT MARRIAG	E	HAVE YOU	. OO BEEN THE TOOGET IN THE BEE			HAS PRESEN	ENT SPOUSE BEEN		
ORM ATI	DAT	E P	LACI	E (County and State)	FULL (GIVEN NAME	OF SPOUSE	NO NO		YES		NO OF TIMES	NO	YES	NO OF TIMES
ND INF								BELOW.						ATION REQUE	
ouse ⊿	FC	<u>MATIO</u> DRMER RIAGE C		NAME OF THE SP		DATE OF	IARRIAGE OF BOT				POUSE	(Continu	1	<u>sheet if necess</u> ASON (Check o	• •
MEMBER AND SPOUSE AND INFORMATION	YOUR- SELF	spo		THE DISSOLVED M		DISSOLUTIO	NO		face of dissolution (County and State)			DEATH	ANNULMENT	DIVORCE	
N BMBEF ORT/PA															
ERVICE I G SUPP															
JS OF SI															
L STATI															
MARITAL STATUS OF SERVICE REGARDING SUPF	IS THER	E A COI	JRT C	RDER OR WRITTEN AGRE	EMENT IN EFF	ECT RELATIVE T	O SUPPORT/MAINTE	ENANCE/PAT	ERNIT	Y?					
SECTION 4		YES		IF YES, STATE DATE AN	D PLACE (cou	nty and state) W	HERE SUCH ORDER	AGREEMENT	ΓWAS	SISSUED A	ND ATT	ACH A C	OPY.		
	GINAL										Designe	ed Using	g FormFlow 2.2	22, HQMC/AR	SE, Apr 01

Figure 3-4a - A Dependency Application, NAVMC Form 10922, Submitted for Claiming a Mother as a Dependent.

NA	VMC 10922 (Rev. 4-01) (EF) Page 2			MARINE, ALONZO DE					
<u> </u>	HAS NATURAL PARENT OTHER THAN CLAIMANT OF	CHILD(REN) LISTED EVE	ER BEEN A MEMBER	OF ANY U.S. ARMED FORCES	6?				
NATURAL PARENT OF IN ARMED FORCES	NO								
SECTION 5 NATURAL CHILD IN ARMED									
MED FORCES	HAS YOUR SPOUSE EVER BEEN A MEMBER OF ANY U	I.S. ARMED FORCES?							
N A B	YES. IF YES, COMPLETE THE BLOCKS BELO	W.							
OUSE	SSN GRADE TYPE OF SERVICE E	BRANCH OF SERVICE	INCLUSIVEDA	TES OF ACTIVE SERVICE	ВАН				
SECTION 6 SPOUSE IN ARMED	REGULAR				WITH DEPENDENTS WITHOUT DEPENDENTS BAH DIFF				
SECTION 7 CERTIFICATION	I CERTIFY that all the above statements are true knowledge and belief, and I consent to checkage any allowances paid on laws and regulations. I vinform my commanding officer of any change in status of my dependents, whether it be the gain dependents, or the loss of dependents.	against my pay for vill immediately the number and/or	hereon or obtain application, to m extent necessary		essing/adjudication of this custodians thereof, to the on of benefits, entitlements				
CERTIFI			1	23 45 6789	SCT				
, N	(Signature of M	larine)	_	Security Number)	SGT (Grade)				
SECTIO	Subscribed and sworn 10 day of	June 01							
			· T. I	(Signature and Title of	-				
	Document Viewed (List and attach all	l documents viewed	1) <u> </u>	STEWART, CWO2, USM (Type Name grade of					
	FOR USE BY COMMAND APPROVING AUTHORITY:	FOR USE BY UNIT DIARY	CLERK:	FOR USE BY C	MC APPROVING AUTHORITY:				
	APPROVED AS CLAIMED FORWARDED TO CMC (CODE MRP-1) FOR APPROVAL FOR DEPENDENT NUMBERS	REPORTED ON UNIT D	IARY:						
	APPROVED FOR 1 DEPENDENT	NO							
	NUMBERS:	DATED							
IORITY		Buo							
AUT!	APPROVED FOR CHILD BORN OUT OF WEDLOCK FOR DEERS	RUC							
ROVING AUTHORITY	ELIGIBILITY PER MCO P5512.11. CHECK ONE	ENTRIES REPORTED:							
APPR	CHILD RESIDES IN MEMBER'S HOUSEHOLD ORDER								
ω NO	HOUSEHOLD CRUER (Recertify annually) No Court Order								
SECTION									
	(Signature of commanding officer)								
	JOHN A. MAY, MAJOR								
	(Typed name and grade of commanding officer)								
	1STBN 6THMAR 2DMARDIV FMFLANT (Unit Designation)								
OBI	GINAI	I		Designed Using Form	nFlow 2.22, HQMC/ARSE, May 01				

Figure 3-4b - A Dependency Application, NAVMC Form 10922, Submitted for Claiming a Mother as a Dependent.

CHAPTER 4 DEPENDENTS OF MARINES IN A NONPAY STATUS

		PARAGRAPH	PAGE
GENERAL	INFORMATION	4000	4-3
ADMINIS'	TRATIVE INSTRUCTIONS	4001	4-3
MARINE :	IN PRETRIAL CONFINEMENT IN A FOREIGN COUNTRY	4002	4-4
PAYMENT		4003	4-4
	FIGURE		
4-1	SAMPLE FORMAT FOR A LETTER TO NOTIFY ADULT DEPENDENT OF THE RIGHT TO BE PAID BAH		4-5
4-2	SAMPLE FORMAT OF APPLICATION FOR BAH, MEMBER IN A NONPAY STATUS		4-6
4-3	IN A NONPAY STATUS IN PRETRIAL CONFINEMENT IN A FOREIGN COUNTRY. BAH PREVIOUSLY PAID FOR A		
	TWO MONTH PERIOD		4-7
4-4	MISCELLANEOUS MILITARY PAY ORDER/SPECIAL PAYMENT AUTHORIZATION NAVMC FORM 11116		4-8

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CHAPTER 4

DEPENDENTS OF MARINES IN A NONPAY STATUS

4000. GENERAL INFORMATION

- 1. A dependent of a Marine who is not residing in Government Housing, and is living in a household maintained by the Marine, for which the Marine is receiving BAH, may request to be paid BAH directly; if all of the following conditions exist for 30 or more days:
 - a. Marine has entered an unauthorized absence status,
 - b. Marine is in the hands of civil authorities, or
 - c. Marine is in pretrial confinement in a foreign country.
- 2. This benefit is only authorized for Marines in pay grade E-1 through E-4 with 4 years or less active duty. Payment of BAH not to exceed 2 months from the first day of absence. Exceptions to this policy will be considered for any enlisted Marine in pretrial confinement in a foreign country, and should be requested from the CMC (MRP-1) on a case-by-case basis when extreme financial hardship for the dependent exists.

4001. ADMINISTRATIVE INSTRUCTIONS

- 1. After a 30 day absence, the commanding officer is responsible for notifying the primary next of kin dependent, by letter, of their right to make application for BAH during the Marine's absence. See figure 4-1 for a sample letter. Figure 4-2 or 4-3, as applicable, should be enclosed with the letter for completion and returned to the Marine's commanding officer.
- 2. The dependent's application for BAH (figure 4-1) must be received at CMC (MRP-1) within 90 days after the date the absence commenced for a determination of eligibility. If the command failed to notify the proper dependent in a timely manner of the right to apply for BAH, and that failure resulted in the late receipt of the application after the 90-day stipulation, the Marine's commanding officer will request the CMC (MRP-1) to waive the 90-day limitation. The request must contain information concerning the reason for the delay and the date the dependent was actually notified.

- 3. A request to the CMC (MRP-1) for BAH in excess of 60 days must include the appropriate documentation shown in figure 4-2 or 4-3. The following applies:
 - a. an itemized list of monthly expenses, and
- b. a notarized statement made and signed by the dependent itemizing the income from all sources.

Payment of BAH in excess of 60 days is only authorized for Marines in pretrial confinement in a foreign country. Once a determination is made, the CMC (MRP-1) will notify the Marine's commanding officer of the decision. The commanding officer will in turn notify the dependent of the decision.

- 4. After the completed form shown in figure 4-2 or 4-3 is received by the commanding officer, the finance officer will be notified. Commands not located in the same geographical location as the finance officer are authorized to submit all pertinent information to the finance officer.
- 4002. MARINE IN PRETRIAL CONFINEMENT IN A FOREIGN COUNTRY. Payments of BAH for a Marine in pretrial confinement in a foreign country can be authorized by the commanding officer for enlisted members in the grades of E-1 through E-4, with 4 years or less active duty. A Marine in the grade of corporal and higher with 4 years or more active duty must have approval from the CMC (MRP-1) for payment. These payments are not to exceed 2 months without further approval from the CMC (MRP-1).
- 4003. <u>PAYMENT</u>. Payment will be accomplished by the commanding officer's submission of a Miscellaneous Military Pay Order/Special Payment Authorization, NAVMC Form 11116, to the finance officer. See figure 4-4.

	Unit Hea	ading	
			1751
			-
Dear	:		
pretrial confinement in a foreign of	country; in the hands of cive directly to the adult next	still (absent without leave from this organiza vil authorities). Public law authorizes the pay of kin. Under certain circumstances, you ma	ment of
		complete this enclosure, have it notarized, an pproved, payment will be made directly to yo	
*If your spouse's pretrial confiner submit an additional request for B		and you are suffering a financial hardship, y	ou may
I regret that you must suffer the hassistance to you, please do not ha		our (RELATIONSHIP)'s situation. If I may be one address above.	of further
		Sincerely,	
		JOE J. MARINE Major, U.S. Marine Corps Commanding	
Encl: (1) (2)			
*Use only if applicable			

Figure 4-1 - Sample Format of Letter to Notify Adult Dependent of the Right to be Paid BAH.

Application for BAH Pursuant to Public Law 93-64 and DODFMR par. 30251

Part A: Completed by Command

							(DATE)
Marine's Name							
(LAST)		(FIRST)		(M)	(SSN)	(RANK/GR	ADE)
1. Nonpay Status () UA	() IHCA () Pretrial Confinement i	n a Foreign (Country			
2. Name of Dependent _							
	(LAST)	(FIRST)		(M)		(RELATIONSHIP)	
_		(COMPLET	E ADDRESS)				
3. Date of Nonpay Status							
	(DAY)	(MONTH)	(YEAR)				
		(SIGNATURE OF CO	MMANDING C	FFICER)	— 		
		Part B: Complet	ed by Dep	endent			
							(DATE)
1. It is requested th	at as a result	of — status, I be p	aid BAH.				
2. I certify that the	Marine listed	above is not residing wit	h or has not	joined n	ne at my	residence.	
		(SIGNATURE C)F DEPENDEN	IT)	—— 		
		Part C: Comp	leted by No	otary			
Subscribed and duly sworn 20 at city (or town) of	`	,	•			•	
My commission expires:							
		(SIGNATURE	OF NOTARY)			

Figure 4-2 - Sample Format of Application for BAH, Member in a Nonpay Status.

Application for BAH Pursuant to Public Law 93-64 and DODFMR 7000.15-R, *****par. 30251

Part A: Completed by Command

							(DATE)
Marine's Name							
(LAST)		(FIRST)		(M)	(SSN)	(RANK/GI	RADE)
1. Nonpay Status () Pretrial Con	finement in a Foreign	Country				
2. Name of Dependent							
	(LAST)	(FIRST)		(M)	(RELATIONSHIP)		
-		(COMI	PLETE ADDRESS)			
3. Date of Nonpay Statu	is						
	(DAY)	(MONTH)	(YEAR)				
		(SIGNATURE OI	COMMANDING	<i>'</i>	 '		
		Part B: Com	pleted by De				
							(DATE)
1. Request that I	be provided B	AH in addition to the 2	months previo	usly autho	orized because of fina	ancial hardsh	ip.
2. I certify that t	he Marine liste	d above is not residing	g with or has no	t joined r	ne at my residence.		
		(SIGNATU	IRE OF DEPENDE	,			
		Part C: Co	mpleted by N				
Subscribed and duly swo							
20 at city (or town)	of	county o	of		and state of	·	
My commission expires:							
		(SIGNAT	TURE OF NOTAR	Y)			

Figure 4-3 - Sample Format of a BAH Application for Member in a Nonpay Status in Pretrial Confinement in a Foreign Country.

MISCELLANEOUS MILITARY PAY ORDER/SPECIAL PAYMENT AUTHORIZATION NAVMC 11116 (REV. 5-90) (EF) (Previous editions are obolete and will not be used) SN: 0109-LF-065-3800 DATE RUC NAME OF INDIVIDUAL (LAST, FIRST, MI) ECC SSN TO DISBURSING OFFICER: YOU ARE AUTHORIZED TO DEBIT CREDIT ADJUST THE INDIVIDUALS MILITARY PAY ACCOUNT FOR TRANSACTIONS INDICATED YOU ARE DIRECTED TO MAKE THE FOLLOWING SPECIAL PAYMENT BASED ON THE TRANSACTIONS INDICATED **PAYMENTS (Requires Commanding Officer's Signature)** PAYDAY ADJUSTMENT PURPOSE: SEVERE HARDSHIP EVENTS AGED 60 DAYS OR MORE MEMBER'S JUMP/MMS RECORD NOT IN CENTRAL SITE SPECIAL ACCESSION MESSAGE ATTACHED TYPED NAME/GRADE OF COMMANDING OFFICER DATE SIGNATURE OF COMMANDING OFFICER **ADJUSTMENTS** ADVANCE PAY _ MONTHS ADVANCE PAY INCIDENT TO PCS ORDERS. REPAYMENT -MONTHS ADVANCE AND ALLOWANCES FOR ASSIGNMENT TO A REMOTE LOCATION ADVANCE PAY AND DEPLOYED ABOARD SHIP FOR MORE THAN 30 DAYS PURSUANT TO DODPM, PAR 40102. ALLOWANCES PAY_____ MONTHS ADVANCE HOUSING ALLOWANCE TO BE REPAID IN MONTHLY PAYMENTS. ADVANCE HOUSING EFFECTIVE DATE _ ALLOWANCES

CERTIFYING OFFICER TYPED NAME, GRADE TITLE	SIGNATURE OF COMMANDING OFFICER	DATE

REPORTED

Figure 4-4 - Sample Miscellaneous Military Pay Order/Special Payment Authorization, NAVMC Form 11116.

DATED

UNIT DIARY NO.

EFFECTIVE DATE

OTHER

CHAPTER 5 MARINE CORPS RESERVISTS

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CHAPTER 5

MARINE CORPS RESERVISTS

5000. GENERAL INFORMATION. On each occasion a dependent is gained or lost, members of the Marine Corps Reserve will submit a Dependency application, NAVMC Form 10922, under the same regulations as active duty members; however, the date the allowance is claimed from will be left blank for the purpose of mobilization, entry on active duty for training, or for reenlistment to active duty.

5001. APPROVAL LEVEL OF THE DEPENDENCY APPLICATION, NAVMC FORM 10922

- 1. Commanding officers of separate companies, detachments, squadrons, etc., that are located apart from their parent commands are authorized to approve NAVMC Form 10922 authorized for command approval. Forward NAVMC Form 10922 directly to the CMC (MMSB-20).
- 2. NAVMC Form 10922s requiring the CMC (MRP-1) approval or diary action are to be forwarded with the appropriate blocks marked in the "Approving Authority" section.
- 5002. RECORDS. Each OQR and SRB must contain a current NAVMC Form 10922 for Marines in receipt of BAH at the dependent rate, listing all the Marine's dependents. Each dependent must reflect an approval or disapproval from the commanding officer or the CMC (MRP-1), as applicable. Upon determination of each NAVMC Form 10922, the CMC (MRP-1) will return a copy to the originating command for inclusion in the Marine's SRB or OQR.
- 5003. CHECKLIST FOR SUBMITTING DEPENDENCY APPLICATIONS, NAVMC FORM 10922. The applicable checklists in chapters 1 through 3 should be used, as appropriate.

CHAPTER 6

DEPENDENT SUPPORT

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CHAPTER 6

DEPENDENT SUPPORT

- 6000. GENERAL INFORMATION. The provisions of this chapter apply to the support of dependents of Marines, including complaints of nonsupport or inadequate support, involuntary child and spousal support allotments, and garnishment of pay for enforcement of child and spousal support obligations.
- 6001. INFORMATION AND POLICY FOR THE SUPPORT OF DEPENDENTS. All Marines are expected to provide adequate and continuous support for their lawful dependents and comply with the terms of separation/ property settlement agreements and court orders. The policy of the Marine Corps regarding financial support of family members is set forth in Chapter 15 of the current version MCO P5800.16A (LEGADMINMAN). Failure to do so is punishable under Article 107 (False Official Statement) and Article 121 (Larceny) of the Uniform Code of Military Justice (UCMJ).

6002. ALIMONY AND CHILD SUPPORT

- 1. Regulations regarding dependents for whom BAH or other allowances are payable, are defined in the Department of Defense Financial Management Regulation 700.15-R (DODFMR), Volume 7A, Chapter 26. For purposes of qualifying for BAH, a former spouse is not a dependent even though alimony has been decreed. Marines are expected to comply with the terms of court orders or divorce decrees which adjudge payments of alimony, even though BAH is not payable until the responsibility for compliance is terminated by a civil court or competent jurisdiction or by written agreement between the persons concerned.
- 2. If the decree is silent as to alimony payments, it is presumed that the court intended no such payments.
- 3. Where a valid court order exists, and the Marine concerned is financially unable or refuses to comply, the Marine will be advised that noncompliance with the terms of that order renders the Marine liable to further action by civil courts and UCMJ, as well as adverse administrative action per reference (b).
- 4. The duty of Marines to support their minor children is not terminated by desertion or other misconduct on the part of the spouse. Similarly, the obligation to support a child or children is not eliminated or reduced by dissolution of the marriage through divorce; unless the judicial decree

or order specifically terminates or alters the Marine's support obligation. The fact that a divorce decree is silent relative to support of minor children, or does not mention a child or children, will not be interpreted as relieving the Marine of the inherent obligation to provide support for the child(ren) of the marriage.

6003. COMPLAINTS OF NONSUPPORT OR INADEQUATE SUPPORT OF DEPENDENTS

- 1. All complaints alleging nonsupport or inadequate support of dependents will be promptly acknowledged and the complainant shall be informed of the action taken in accordance with chapter 15 of MCO P5800.16A.
- 2. Upon receipt by the CMC (MRP-1) of a complaint alleging that a Marine is not adequately supporting lawful dependents, the Marine's command will be notified of the complaint and will be directed to interview and counsel the Marine regarding support obligations. The command will be directed to respond to the alleged complaint and provide all supporting documentation to the CMC (MRP-1). If the member has previously been the subject of a similar allegation, the member's command will be notified by the CMC (MRP-1). Servicemembers should be advised by their command of the complaint, and appropriate action should be taken within the time period required by MCO P5800.16A.
- 3. The Marine concerned should be advised that in the absence of a determination by a civil court or a mutual agreement of the parties, the amount of support provided to a dependent should not be less than the BAH received on behalf of that dependent.
- a. If in receipt of BAH-Diff for payment of child support, support may not be less than the amount received for that dependent.
- b. If in receipt of BAH-With, support should be in compliance with reference (b).

6004. GARNISHMENT PROCEDURES FOR ENFORCEMENT OF CHILD SUPPORT AND ALIMONY OBLIGATIONS

1. Information pertaining to the pay of servicemembers, active and retired, may be found in DFAS P2220.31-R, subject to legal process for the enforcement of child support or alimony payment. "Legal process" may be in the form of garnishment, attachment, wage assignment, orders to withhold and delivery, and other forms.

2. Upon receipt of such legal process, it will be forwarded immediately to the Director, Defense Financing and Accounting Service Cleveland, Attention: DFAS-GAG/CL, P.O. Box 998002, Cleveland, OH 44199-8002. The letter of transmittal will state the date of service and method by which service was made.

CHAPTER 7 ALLOWANCE FOR HOUSING TO SURVIVING DEPENDENTS

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CHAPTER 7

ALLOWANCE FOR HOUSING TO SURVIVING DEPENDENTS

7000. ELIGIBILITY

- 1. Effective 1 January 1998, an allowance for housing will be paid to dependents of Marines who die in the line of duty when one of the following conditions exists:
- a. the dependents do not occupy Government housing on the date of death,
- b. the dependents are occupying Government housing on rental basis on the date of death,
- c. the dependents vacate Government housing within 180 days of the Marine's death, or
 - d. the dependents cannot be claimed by another servicemember for BAH.
- 2. The allowance terminates 180 days after the date of the Marine's death.
- 3. When the Marine is killed by a dependent(s), BAH is not payable to that dependent(s) unless there is evidence which clearly absolves said dependent(s) of any felonious intent.
- 7001. PRIORITY OF PAYMENT. Payments to the surviving dependent(s) will be made in the following order:
- 1. Current spouse (not including a military spouse eligible to receive housing allowances for the same dependent(s) as the deceased Marine).
- 2. If there is no current spouse, the housing allowance will be divided equally among the dependent(s) on whose behalf the Marine was entitled to receive "with-dependents" BAH.

7002. AMOUNT AND METHOD OF PAYMENT

1. The allowance shall be paid in the same amount and in the same manner as the deceased Marine would have been paid and may be paid in a lump sum as an advance payment. For payment of BAH, see DODFMR, volume 7A.

2. Examples are:

- a. Marine died 5 January 1999, and dependents vacated nonrental Government housing on 12 February 1999. Pay BAH to the dependents at the appropriate monthly rate for 12 February through 4 July 1999, which is the 180th calendar day after the date of death.
- b. Marine died 16 March 1999, the Marine's dependents did not occupy Government family-type housing. Pay BAH to the dependents for the period beginning 17 March through 12 September 1999, a total of 180 calendar days. The dependents would receive 14 days in March, the entire 30/31 days for the months of April, May, June, July, and August, and 12 days in September.
- c. Payments under this section are not subject to collection of any debts owed by the deceased member to the United States.

APPENDIX A

DEFINITIONS

ABSENT PARENT - Any individual who is absent from the home and has a duty to provide financial support for a dependent child(ren), more commonly referred to as non-custodial parent (NCP) or obligor.

ADJUDICATION - The entry of a judgment, decree or order by a judge or other decision maker such as a master, referee, or hearing officer based on the evidence submitted by the parties.

ADMINISTRATIVE PROCESS - A statutory system granting authority to an executive agency to determine child(ren) support legal obligations, including paternity, establishment, order establishment, enforcement, and modification.

AFFIDAVIT - A written statement signed under oath or by affirmation, which is usually notarized.

ALLEGED FATHER - A person who has been named as the father of a child(ren) born out of wedlock, but who has not been legally determined to be the father; also referred to as putative father.

ARREARAGE - The total unpaid support obligation for past periods owed by an absent parent.

BAH DIFF - An entitlement for child support, based on the member's rank.

CUSTODY - Legal custody is a legally binding determination, which establishes with whom a child(ren) should live. Physical custody is where the person has physical possession of the child(ren), regardless of the legal custody status. Joint custody occurs when two persons share legal and/or physical custody of the child(ren). Split custody occurs when the child(ren) from the same parents are in the legal, sole custody of more than one person.

CUSTODIAL PARENT - A parent who has primary care of the child(ren), which may include having legal custody of the child(ren).

DECREE - The judicial decision of a litigated action, usually in "equitable" cases such as divorce (verses cases in law in which judgments are entered).

DECREE NISI OF DIVORCE - A divorce effective at a specified time unless previously modified or voided by cause shown, further proceedings, or a condition fulfilled (decree).

DEFAULT - The failure of a defendant to file an answer or appear in a civil case within the prescribed time after having been properly served with a summons and complaint.

DEFAULT JUDGMENT - A decision made by the court or administrative authority when the defendant fails to respond or appear.

DEPENDENCY DETERMINATION - A financial decision made to determine if the dependent is financially dependant upon the sponsor for sufficient monthly support.

DEPENDENT - A person who relies upon a servicemember for their financial support.

DEPENDENT CHILD/CHILDREN - Child/Children born out of wedlock.

DISABLED - Any restriction or lack of ability to perform an activity in the manner and within the range considered normal for a human being.

DIVORCE - The legal separation of a husband and wife affected by the judgment or decree of a court.

FOREIGN DIVORCE - A divorce obtained out of the United States and its territories.

GARNISHEE - The person who is responsible for the payment of monies to the garnishment.

GARNISHMENT - A legal proceeding whereby a person's property, money or credit, in the possession of or under the control of a third party, is withheld from the garnishee and is applied to the payment of the defendant's debt.

IHCA - In the Hands of Civil Authorities.

INCAPACITATE - To limit in ability, power, or fitness; disable.

IN LOCO PARENTIS - Acting as a parent by assuming parental duties and
responsibilities.

INTERLOCUTORY DECREE OF DIVORCE - Pronounced during the progress of a legal action and having only provisional force.

LEGAL FATHER - A man who is recognized by law as the male parent of another person.

LEGITIMATE CHILD/CHILDREN - Child/Children born of a legal marriage.

PATERNITY - Legal determination of fatherhood.

PRE-ADOPTIVE - See Ward.

SPOUSAL SUPPORT - Court ordered support of a spouse or former spouse; also referred to as maintenance or alimony.

WAGE WITHHOLDING - A procedure by which automatic deductions are made from wages or income to pay a debt such as child support; may be voluntary or involuntary.

- **WARD** An unmarried person who is placed in the legal custody of the member, or former member, as a result of an order of a court of competent jurisdiction in the United States (or a territory or possession of the United States) for a period of at least 12 consecutive months and either:
 - a. has not attained the age of 21;
- b. has not attained the age of 23 and is enrolled in a full-time course of study at an institution of higher learning approved by the administering Secretary; or
- c. is incapable of self support because of a mental or physical incapacity that occurred while the person was considered a dependent of the member or former member; and,
- d. is dependent on the member or former member for over one-half of the person's support;
- e. Resides with the member, or former member, unless separated by the necessity of military service or to receive institutional care as a result of disability or incapacitation; and,
- f. is not a dependent of a member or a former member under any other subparagraph.