

ALL PURPOSE CHECKLIST

TITLE/SUBJECT/ACTIVITY/FUNCTIONAL AREA
 Denial of Military Funeral Honors for:
 Time Sensitive; Complete all steps ASAP

OPR _____ DATE _____

NO.	ITEM <i>(Assign a paragraph number to each item. Draw a horizontal line between each major paragraph.)</i>	Yes	No	
1	Received information that may fall under Title 10 U.S.C. § 985(a)(1) and 38 U.S.C. § 2411 (b)(3)(B) and DODI 1300.15 (Federal and State capital crime, or other circumstances as specified by the Secretary of Defense are such that to provide honors would bring discredit upon the service) for the purposes of the potential for denial of military funeral honors for Active Duty / Retiree / Veteran	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2	Notify PNOK that your office will pursue denial of honors. If PNOK request is withdrawn, write MFR for the file, notify AFMAO and there will be no further action necessary. If the PNOK still requests honors follow the remaining checklist items.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3	Notify the following: FSS/CC MSG/CC WG/CC WG/JA	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4	Notify AFMAO/MA of the potential for denial of honors, provide name, category of deceased, circumstances of death or other circumstances that led to the pursuing of denial of honors determination, and Primary Next of Kin name and address	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5	Obtain all information available on the specific circumstances, e.g. police reports, offender public information, AFOSI or other investigative agency reports if available, local or national news reports, statements from unit commander (if active duty member)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6	Obtain legal opinion from WG/JA	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7	Obtain concurrence/non-concurrence from WG/CC	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8	Provide opinions, and supporting documents to AFMAO/MA	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9	Received determination by HAF/A1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10	Notify PNOK of HAF/A1 determination Notify PNOK that a letter from HAF/A1 is forthcoming Notify Funeral Home if appropriate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11	Confirm notification to PNOK with AFMAO/MA	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

