

## LEAVE SETTLEMENT OPTION

### PRIVACY ACT STATEMENT

**AUTHORITY:** 10 U.S.C., Chapter 833, Enlistments, Executive Order 9397 (SSN), as amended.  
**PURPOSE:** To document the member's decision on selling all, part, or no leave in conjunction with their reenlistment or first voluntary extension.  
**ROUTINE USE:** Disclosures generally permitted under 5 U.S.C. 552 a(b) of the Privacy Act, may be specifically disclosed outside DoD as a routine use pursuant to 5 U.S.C. 552a(b)3, the "Blanket Routine Uses" Apply.  
**DISCLOSURE:** VOLUNTARY. However, if the information is not provided, the request to settle leave balance may not be processed.  
**SORN(s):** F036 AF PC G, Selective Reenlistment Consideration

#### I. IDENTIFICATION DATA

NAME (Last, First, Middle Initial) <b>Doe, John E.</b>	GRADE <b>06</b>	SSN <b>111-22-3333</b>
UNIT OF ASSIGNMENT <b>Air Force Command 101</b>	DUTY PHONE (DSN) <b>847-0000</b>	ETS <b></b>
		DOS <b>20210824</b>

#### II. LEAVE SETTLEMENT ON REENLISTMENT

~~In conjunction with my reenlistment on \_\_\_\_\_, I hereby make the leave settlement election as indicated below. I understand if I am in an advance leave or excess leave status at this time, I should immediately report to the Accounting and Finance Office for counseling concerning the treatment of advance or excess leave upon reenlistment. I understand and acknowledge that I cannot sell more than 60 days accrued leave during my entire military career. I UNDERSTAND AND ACKNOWLEDGE THAT I WILL NOT BE ALLOWED TO CHANGE MY ELECTION ONCE I HAVE REENLISTED.~~

INITIAL/MARK	INITIAL/MARK
A. CASH SETTLEMENT FOR ALL OF MY ACCRUED LEAVE.	<input type="checkbox"/>
B. CARRY FORWARD ALL OF MY ACCRUED LEAVE.	<input type="checkbox"/>
C. CASH SETTLEMENT FOR _____ DAYS.	<input type="checkbox"/>

#### III. LEAVE SETTLEMENT ON ENTRY INTO FIRST EXTENSION OF ENLISTMENT

~~In conjunction with me entering my first extension on \_\_\_\_\_, I hereby make the leave settlement election as indicated below. I acknowledge full understanding that I cannot sell any accrued leave on entry into a second or later extension I make to my current enlistment. I understand that if I apply for voluntary separation, any leave sold upon entry into my first extension of enlistment will effect the number of terminal leave days I have available. I also understand that if I am in an advance leave or excess leave status at this time, I should immediately report to the local Accounting and Finance Office for counseling concerning the treatment of advance or excess leave upon entry into an extension. I understand and acknowledge that I cannot sell more than 60 days accrued leave during my entire military career. I UNDERSTAND AND ACKNOWLEDGE THAT I WILL NOT BE ALLOWED TO CHANGE MY ELECTION ONCE I AM WITHIN 10 CALENDAR DAYS OF THE EFFECTIVE DAY OF MY ENTRY INTO THE EXTENSION OF ENLISTMENT.~~

INITIAL/MARK	INITIAL/MARK
A. CASH SETTLEMENT FOR ALL OF MY ACCRUED LEAVE.	<input type="checkbox"/>
B. CARRY FORWARD ALL OF MY ACCRUED LEAVE.	<input type="checkbox"/>
C. CASH SETTLEMENT FOR _____ DAYS.	<input type="checkbox"/>

#### IV. MPS VERIFICATION SECTION

MPS REMARKS

IV. LEAVE SETTLEMENT AT END OF MPA/RA TOUR (RC ONLY)

In conjunction with my projected end of MPA/RPA Tour on **20200930** and order number **(Write order number located on AF 938 #32)** I hereby make the leave settlement election as indicated below. I understand and acknowledge that I cannot sell more than 60 days of non-excepted accrued leave (leave earned for continuous active duty over 365 days not in support of contingency operations) during my entire military career with exception to Special Leave Accrual. I understand CZTE will be used first during my next chargeable leave period. I understand I cannot sell carryover leave when not on MPA/RPA tour of duty and I cannot use leave while on Annual Training or Inactive Duty Training.

A. CASH SETTLEMENT FOR ALL MY ACCRUED LEAVE ( 25 DAYS).

B. CARRY FORWARD ALL OF MY ACCRUED LEAVE ( \_\_\_\_ DAYS)

MPS SIGNATURE	DATE
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#### V. MEMBERS VERIFICATION SECTION

SIGNATURE OF MEMBER <b>JED</b>	**THIS CAN BE A EITHER A WET OR DIGITAL SIGNATURE**	DATE <b>20200815</b>
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**REQUEST AND AUTHORIZATION FOR ACTIVE DUTY TRAINING/ACTIVE DUTY TOUR**

**BY ORDER OF THE SECRETARY OF THE AIR FORCE**

**PRIVACY ACT STATEMENT**

**AUTHORITY:** 10 USC 8013; Executive Order 9397.  
**PRINCIPAL PURPOSES:** Used to request and authorize Air Force reservist tours of active duty as well as acting as a temporary duty travel order. SSN is used to make positive identification of military personnel. Becomes record copy of orders after authentication; enables reservist to procure transportation, receive reimbursement for travel expenses and be paid military pay, as applicable.  
**ROUTINE USES:** A copy of the order may be provided to civilian employers to substantiate active duty military requirements.  
**DISCLOSURE IS VOLUNTARY:** However, without this information and SSN the Air Force cannot act on your travel, per diem and pay entitlements.

1. NAME (Last, First, MI) [REDACTED]		2. GRADE MSGT	3. SSN [REDACTED]	
4. PRESENT STREET ADDRESS [REDACTED]		5. CITY [REDACTED]		6. STATE CO
7. ZIP CODE [REDACTED]		8. UNIT OF ASSIGNMENT [REDACTED]		9. LOCATION SCHRIEVER SFB, CO 809120000
10. PAS CODE [REDACTED]				

11. Mbr is ordered to **ACTIVE DUTY OPERATIONAL SUPPORT** for **150** \* days plus auth tvl time. (0 Tvl Days) **TRACKING #: 9857219**

12. WILL REPORT TO (Unit and location) HQ AIR FORCE PERSONNEL CENTER, BUCKLEY, CO 80011-0000		13. REPORTING DATA (Hour) (YYYYMMDD) 0730 20230504	14. RELEASE DATE (YYYYMMDD) 20230930
15. CORPORATE LIMITS <input checked="" type="checkbox"/>		16. COMMUTING AREA <input type="checkbox"/>	17. BAS CODE S

18. REMARKS **AUTH: AFMAN 36-8001** (File travel voucher and completed statement of tour of duty within 5 workdays after tour completion. Travel days will not exceed DODFMR authorized travel time. Per diem is based on availability of gov't quarters and mess; contact the base billeting office since gov't quarters must be used when available.)  
 SEE NEXT PAGE FOR REMARKS.

CONTINUED ON NEXT PAGE

19. TNG-CAT-IND LA	20. TOUR-IND	21. MEAN CODE	22. MAN-DAY ID
<b>ESTIMATED COST</b>	23. TRAVEL \$0.00	24. PER DIEM \$0.00	25. OTHER \$0.00
26. TOTAL \$0.00			

27. **PAY AND ALLOWANCE**  
 5733700 503 6272 P727.02 387700 NA0ELA

28. TRAVEL REQUESTING OFFICIAL (Typed name, grade, DSN) SIUL MICHEL, LT COL, 312-560-0460	29. SIGNATURE "ELECTRONICALLY APPROVED"	30. DATE 20230403
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31. DEPARTMENT OF THE AIR FORCE (Enter designation and location of headquarters.) 926 WG SWC NELLIS AFB, NV 89191	TDN: FOR THE COMMANDER	35. AUTHORIZING/ORDER ISSUING OFFICIAL (Title and Signature) ANGELINA D LORETO, GS11 "ELECTRONICALLY APPROVED"
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**THIS IS A CERTIFIED CLOSED ORDER BOXES 36-44 COMPLETE**



32. RESERVE ORDER NO. DADU74	33. DATE 20230405	34. DISTRIBUTION
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STATEMENT OF TOUR OF DUTY				STATEMENT OF TOUR OF DUTY						
	LOCATION	HOUR (mil)	DAY	MONTH		LOCATION	HOUR (mil)	DAY	MONTH	MODE OF TRAVEL
a. DEPART	<b>HOME ADDRESS</b>	<b>TIME/DATE YOU LEFT</b>			b. ARRIVE	<b>UNIT INFO</b>	<b>TIME/DATE OF 1ST DAY OF ORDER</b>			<b>POV</b>
c. DEPART	<b>UNIT INFO</b>	<b>TIME/DATE OF LAST DAY OF ORDER</b>			d. ARRIVE	<b>HOME ADDRESS</b>	<b>TIME/DATE YOU ARRIVED BACK @ HOR</b>			<b>POV</b>
37. I certify that I have complied with the above order. The statements on this form are true and complete. If a Federal Civil Service Employee, I certify that I have applied for appropriate leave.  My Spouse (Circle One) was <b>was not</b> in Active Duty status during this tour. I (Circle One) did <b>did not</b> occupy gov't quarters.						<b>CERTIFICATION</b> 40. Member reported for duty at <b>0900</b> hours on <b>20230504</b> and was released from duty at <b>1600</b> hours on <b>20230930</b> 41. CERTIFYING OFFICIAL'S PRINTED NAME <b>CSS/DIRECT SUPERVISOR</b> 42. DSN				
38. MEMBER'S SIGNATURE <b>DIGITAL/WET SIGNATURE</b>			39. DATE <b>END OF ORDER</b>		43. CERTIFYING OFFICIAL'S SIGNATURE <b>CSS/DIRECT SUP- DIGITAL/WET SIGNATURE</b>			44. DATE <b>END OF ORDER</b>		
47. TIMEKEEPER STATEMENT I certify receiving a copy of this order for civilian pay related review and processing.						45. TIMEKEEPER SIGNATURE				

# OFFICIAL

AROWS-R  
DADU74  
9857219  
2023/04/05

[REDACTED]

ACTIVE DUTY OPERATIONAL SUPPORT

Continuation of AF Form 938, Block 18. Remarks (AFMAN 36-8001):

- a. AUTH: 10 USC 12301(d)
- b. PAY AND ALLOWANCE ESP CODE: N/A.
- c. TRAVELER USES INDIVIDUALLY BILLED ACCOUNT (IBA).
- d. IF THIS ORDER CONFLICTS WITH THE JTR, THE JTR PREVAILS.
- e. IF THIS ORDER IS FOR A PERIOD OF ACTIVE DUTY OF 90 CONSECUTIVE DAYS OR MORE, INITIAL ACTIVE DUTY FOR TRAINING (BMT AND TECHNICAL SCHOOL), OR IN DIRECT SUPPORT OF A CONTINGENCY OPERATION, SUBMIT A DD FORM 214 WORKSHEET (CERTIFICATE OF RELEASE OR DISCHARGE FROM ACTIVE DUTY) VIA VMPF AT THE TIME YOU CERTIFY AND SUBMIT FOR RECEIPT OF PAY.
- f. REPORT TO MPS/FSMPD PRIOR TO DEPARTURE
- g. FOR THIS ORDER, MEMBER WILL DEPART FROM [REDACTED]
- h. RPA orders at ARPC..
- i. MEMBERS DUTY STATUS IS 73.
- j. PERSTEMPO CODE, IS H, Mission Support (within 100 miles) . PERSTEMPO LOCATION IS COLORADO.
- k. RENTAL CAR IS NOT AUTHORIZED AT HQ AIR FORCE PERSONNEL CENTER (20230504 THRU 20230930).
- l. ADVANCE BY FSO IS NOT AUTHORIZED. TRAVELER HAS A GOVT CHARGE CARD AND PIN, WHICH WILL BE USED FOR ATM CASH ADVANCES AND MEALS AND INCIDENTAL EXPENSES (M+IE) PLUS MISCELLANEOUS EXPENSES.
- m. THE TRAVEL AND TRANSPORTATION REFORM ACT OF 1998 (TTRA), PUBLIC LAW 105-264 STIPULATES THAT THE GTCC WILL BE USED BY ALL U.S. GOVERNMENT PERSONNEL, MILITARY AND CIVILIAN TO PAY FOR COSTS INCIDENT TO OFFICIAL GOVERNMENT TRAVEL UNLESS SPECIFICALLY EXEMPT.
- n. ACCRUED ANNUAL LEAVE IS HIGHLY ENCOURAGED TO BE TAKEN DURING THESE ORDERS.