DATA REQUIRED BY THE PRIVACY ACT OF 1974
PERSONAL INFORMATION FROM THE NOK OF A DECEASED SERVICE MEMBER
(5 U.S.C. 552a)

TITLE OF FORM	PRESCRIBING DIRECTIVE
PERSONAL INFORMATION FROM THE NOK OF A DECEASED SERVICE MEMBER	AR 638-8

1. AUTHORITY

10 USC 1475-1480 44 USC 3101

2. PRINCIPAL PURPOSE (S)

The personal information pertaining to you as a NOK of a deceased service member becomes official information when released and is used by HQDA in the settlement of the decedent's personal affairs and financial accounts. To allow the NOK to elect if they want their information released to THIRD PARTIES and MEMBERS OF CONGRESS.

Soldier's Name: _____

3. ROUTINE USES

The information provided to the person(s) assisting you will be forwarded to HDQA for use in settling the personal and financial affairs of the service member. The information requested may be a valid address for you and your children (if applicable), your desires as to the disposition of the decedent's remains, factual information as to your marital status in relation to the decedent's, and other such information which will enable the Army to settle the decedent's personal affairs. It may also be used by other government agencies and selected agencies such as an insurance company or bank. The DOD Blanket Routine Uses may apply to this collection.

Please Initial One of the Options Below: (All parties accounted for in Section 4 must initial one option. If they are a minor child, the parent/guardian will initial).

_____I hereby authorize the U.S Army, through Casualty Mortuary Affairs Operation Center, to release the personal information listed above to THIRD PARTIES that are approved participants in the Non-Federal Entity Program making an offer of support and condolences in the form of letters, grants, tributes to Soldiers, or other related services. I understand this authorization may be revoked at any time, if requested in writing, except to the extent that action has already been taken.
If authorizing the release of personal information concerning a minor, I assert I am the named minor's parent or legal guardian. Please understand, third parties may provide your information to other outside agencies.

_____I DO NOT consent to the disclosure of my personal information to individuals or organizations.

Please Initial One of the Options Below: (All parties accounted for in Section 4 must initial one option. If they are a minor child, the parent/guardian will initial).

_____I hereby authorize the U.S Army, through its agents including my Casualty Assistance Officer, to release the personal information listed above to MEMBERS OF CONGRESS making an offer of support and condolences in the form of letters. grants, tributes to Soldiers, or other related services. I understand this authorization may be revoked at any time, if requested in writing, except to the extent that action has already been taken. If authorizing the release of personal information concerning a minor, I assert I am the named minor's parent of legal guardian.

_____I DO NOT consent to the disclosure of personal information to Members of Congress.

4. MANDATORY OR VOLUNTARY DISCLOSURE AND EFFECT ON INDIVIDUAL NOT PROVIDING INFORMATION

Disclosure of the information is voluntary. However, the disclosure enables the personal affairs and financial accounts of the deceased service member to be finalized and you as a NOK receive any benefits to which entitled. If the required information is not provided, then a delay may be experienced in your receiving those benefits to which you may be entitled.

Print Name	Signature of Person/Parent/Guardian	Date MM/DD/YYYY
Print Name	Signature of Person/Parent/Guardian	Date MM/DD/YYYY