

REQUEST FOR DOSSIER/INDEX CHECK <i>(AR 381-45)</i>			FOR DCII/USAIRR USE ONLY			
NAME <i>(Last name - First name - Middle name)</i>						
			SATISFACTORY NATIONAL AGENCY CHECK			
DATE OF BIRTH <i>(Month-Day-Year)</i>	PLACE OF BIRTH <i>(State or Country)</i>	GEO. CODE	DATE COMPLETED:			
			DCII	<input type="checkbox"/> AF-MPRD	<input type="checkbox"/> CSC	<input type="checkbox"/> USAAC
SERVICE NUMBER	SOCIAL SECURITY NUMBER		FBI-HQ	<input type="checkbox"/> BUPERS	<input type="checkbox"/> CIA	<input type="checkbox"/> FRC
			FBI-ID	<input type="checkbox"/> USMC	<input type="checkbox"/> I & NS	<input type="checkbox"/> HCUA
REMARKS <i>(Requester)</i>			TAG-O	<input type="checkbox"/> USCG	<input type="checkbox"/> STATE-S	<input type="checkbox"/> OTHER
			TAG-E	<input type="checkbox"/> MPRC	<input type="checkbox"/> STATE-P	<input type="checkbox"/> OTHER
			DOSSIER CHARGED TO:		REMARKS	
			AGENCY			
REQUEST NUMBER	DATE		DATE			
REQUESTING OFFICE <i>(Inventory code)</i>	SIGNATURE		DETAIL LIST NUMBER			

DA FORM 1144, DEC 1966

PREVIOUS EDITIONS OF THIS FORM ARE OBSOLETE.

CHARGE OUT COPY 1

APD LC v1.01ES

REQUEST FOR DOSSIER/INDEX CHECK <i>(AR 381-45)</i>			FOR DCII/USAIRR USE ONLY				
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SERVICE NUMBER	SOCIAL SECURITY NUMBER		FBI-HQ	<input type="checkbox"/> BUPERS	<input type="checkbox"/> CIA	<input type="checkbox"/> FRC	<input type="checkbox"/>
REMARKS <i>(Requester)</i>			FBI-ID	<input type="checkbox"/> USMC	<input type="checkbox"/> I & NS	<input type="checkbox"/> HCUA	<input type="checkbox"/>
			TAG-O	<input type="checkbox"/> USCG	<input type="checkbox"/> STATE-S	<input type="checkbox"/> OTHER	<input type="checkbox"/>
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			DOSSIER CHARGED TO:		REMARKS		
REQUEST NUMBER	DATE		AGENCY				
REQUESTING OFFICE <i>(Inventory code)</i>	SIGNATURE		DATE				
			DETAIL LIST NUMBER				

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REQUEST FOR DOSSIER/INDEX CHECK <i>(AR 381-45)</i>			FOR DCII/USAIRR USE ONLY			
NAME <i>(Last name - First name - Middle name)</i>						
DATE OF BIRTH <i>(Month-Day-Year)</i>			PLACE OF BIRTH <i>(State or Country)</i>		GEO. CODE	SATISFACTORY NATIONAL AGENCY CHECK DATE COMPLETED: DCII <input type="checkbox"/> AF-MPRD <input type="checkbox"/> CSC <input type="checkbox"/> USAAC <input type="checkbox"/> FBI-HQ <input type="checkbox"/> BUPERS <input type="checkbox"/> CIA <input type="checkbox"/> FRC <input type="checkbox"/> FBI-ID <input type="checkbox"/> USMC <input type="checkbox"/> I & NS <input type="checkbox"/> HCUA <input type="checkbox"/> TAG-O <input type="checkbox"/> USCG <input type="checkbox"/> STATE-S <input type="checkbox"/> OTHER <input type="checkbox"/> TAG-E <input type="checkbox"/> MPRC <input type="checkbox"/> STATE-P <input type="checkbox"/> OTHER <input type="checkbox"/> DOSSIER CHARGED TO: AGENCY DATE REMARKS DETAIL LIST NUMBER
SERVICE NUMBER			SOCIAL SECURITY NUMBER			
REMARKS <i>(Requester)</i>						
REQUEST NUMBER			DATE			
REQUESTING OFFICE <i>(Inventory code)</i>			SIGNATURE			

DA FORM 1144, DEC 1966

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