

**MILITARY MAGISTRATE CHECKLIST FOR PRETRIAL CONFINEMENT**

(AR 27-10)

NAME		SSN		UNIT		GRADE	
TIME IN SERVICE	AGE	ETS	MARITAL STATUS		TYPE COURT-MARTIAL ANTICIPATED		
			SINGLE	MARRIED	SPECIAL	BCD SPECIAL	GENERAL
WIFE/HUSBAND IN LOCAL AREA			NUMBER OF CHILDREN		1	2	3
Yes			No		OTHER (Specify)		

**PRESENT OFFENSES**

DATE	ARTICLE	DESCRIPTION OF OFFENSES (IF AWOL, list inclusive dates; surrendered/apprehended; circumstances of apprehension.)

If present offense is AWOL, have DA Forms 4187 been submitted? Yes No

**PREVIOUS COURT-MARTIAL CONVICTIONS**

TYPE OF COURT	DATE	GIST OF OFFENSES (If AWOL, list inclusive dates.)

**PREVIOUS ARTICLE 15 PUNISHMENT**

DATE	GIST OF OFFENSES (If AWOL, list inclusive dates.)	PUNISHMENT

**COMMANDER'S MEMORANDUM (to be completed at time of confinement)****PRETRIAL CONFINEMENT IS CONSIDERED NECESSARY FOR THE FOLLOWING REASONS:**

(Indicate specifically the basis for the belief that the accused will not appear at a trial, pretrial hearing or investigation or that the accused will engage in serious criminal misconduct and that less severe forms of pretrial restraint are inadequate. See RCM 305h(2).)

Has elimination action been initiated?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Will elimination action be initiated?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Has the accused been previously confined in the Regional Corrections Facility?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
If so, give dates:				
Has the accused been under any other form of restraint for the present offense?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
If so, did the accused breach this restraint?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Has the unit commander received advice from the Staff Judge Advocate or his designee regarding the accused's pretrial confinement?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
If so, did the SJA concur in the decision to order confinement?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Has the accused been advised of the nature of the offense(s) for which held, the right to remain silent, his rights to counsel, and the procedures by which pretrial confinement will be reviewed in accordance with Appendix G, FH Suppl 1 to AR 27-10?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
If so, give date:				
SIGNATURE OF COMMANDER ORDERING CONFINEMENT	RECOMMENDATION OF BATTALION COMMANDER <input type="checkbox"/> Approval <input type="checkbox"/> Disapproval SIGNATURE			
PRETRIAL CONFINEMENT <input type="checkbox"/> Approved <input type="checkbox"/> Disapproved  DATE:	SIGNATURE OF SPCMCA			

**MEMORANDUM OF REVIEW AND DECISION BY MILITARY MAGISTRATE**

DATE REVIEW DUE _____	On _____ I reviewed the circumstances concerning the pretrial confinement of the accused.
<p>Based upon the reasons set forth above I have determined that the pretrial confinement</p> <input type="checkbox"/> is warranted. <input type="checkbox"/> is not warranted and I order his release from confinement.	
DATE:	SIGNATURE OF MILITARY MAGISTRATE