

Installation  
**ADMINISTRATIVE DISPOSITION OF SHOPLIFTERS**

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**History.** This revision is an administrative revision. This regulation supersedes III Corps and Fort Hood Regulation 210-4 dated 15 April 2001.

**Summary.** This regulation establishes policy for the administrative disposition of individuals apprehended for shoplifting on Fort Hood.

**Applicability.** This regulation applies to all personnel using the Army and Air Force Exchange Services (AAFES) facilities on Fort Hood.

**Supplementation.** Local supplementation of this regulation is prohibited except upon approval of IMWE-HOD-MW.

**Suggested Improvements.** The proponent of this regulation is the Directorate of Morale, Welfare, and Recreation (DMWR). Send comments and improvements to: Commander, US Army Installation Management Command, Headquarters, US Army Garrison, ATTN: IMWE-HOD-MW, Building 194, 37<sup>th</sup> Street, Fort Hood, Texas 76544.

FOR THE COMMANDER:  
  
JOSEPH L. ANDERSON  
BG, GS  
Chief of Staff

*Official:*



CHARLES E. GREEN, SR  
Director, Human Resources

DISTRIBUTION:  
IAW FH FORM 1853, S

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## Contents

### Chapter 1. Overview, page 3

Purpose, 1-1, page 3  
References, 1-2, page 3  
Abbreviations and Terms, 1-3, page 3  
Summary of Change, 1-4, page 3

### Chapter 2. Shoplifting, page 3

Shoplifting by Soldiers, 2-1, page 3  
Shoplifting by military Family members and other individuals, 2-2, page 3

### Chapter 3. Suspension, page 4

Suspension of Post Exchange (PX) privileges, 3-1, page 4  
Confiscation and issuance of new identification (ID) Card, 3-2, page 5

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Suspension periods, 3-3, *page 5*

Reinstatement of privileges, 3-4, *page 5*

**Appendices**

A. References, *page 6*

B. Fort Hood Form 640-X3 (Confiscation of ID Card), *page 7*

C. DA Form 3975 (Military Police Report), *page 8*

D. DA Form 4833 (Commanders Report of Disciplinary or Administrative Action), *page 9*

**Glossary, *page 11***

## **Chapter 1 Overview**

### **1-1. Purpose**

This regulation establishes policy for the administrative disposition of individuals apprehended for shoplifting on Fort Hood.

### **1-2. References**

Appendix A lists required and related references.

### **1-3. Abbreviations and terms**

The glossary explains abbreviations and terms used in this regulation.

### **1-4. Summary of change**

Specifically, this revision dated 7 June 2007 –

- a. Changes Directorate of Community Activities (DCA) to Directorate of Morale, Welfare, and Recreation (DMWR).
- b. Omits the reference to Post Exchange (PX) Guest Pass FH FL 142-E.
- c. Updates the proponent agency's office symbol from AFZF-CA-ASSD to IMWE-HOD-MW
- d. Changes Provost Marshall's Office (PMO) to Directorate of Emergency Services (DES).
- e. Defines process for reinstatement of PX privileges (Chapter 3, section 3-4)

## **Chapter 2 Shoplifting**

### **2-1. Shoplifting by Soldiers**

Process cases involving Soldiers through normal military procedures. Upon receipt of Department of the Army (DA) Form 3975, Military Police Report (MPR), (see Appendix C) or other notification of an alleged shoplifting offense committed by a Soldier at an Army Air Force Service (AAFES) facility, the Commander:

- a. Conducts a preliminary inquiry and, if appropriate, initiates administrative or Uniform Code of Military Justice (UCMJ) action.
- b. Forwards a copy of the DA Form 4833, Commander's Report of Disciplinary or Administrative Action (see Appendix D) to Headquarters III Corps and Fort Hood, ATTN: Department of Emergency Services, Fort Hood, Texas 76544.

### **2-2. Shoplifting by military Family members and other individuals**

The following procedures pertain to the disposition of all military Family members and all other individuals not subject to UCMJ action.

- a. Adults:
  - (1) At the time of apprehension, the investigating military police (MP) releases the suspected offender after confirmation of the offender's complete mailing address.
  - (2) The offense is reported on an MPR, which is forwarded to the United States Magistrate Court prosecutor.

(3) The United States Magistrate Court forwards the DA Form 4833 listing the outcome of all shoplifting cases to the DES.

b. Juveniles:

(1) At the time of apprehension, the investigating MP releases the suspect after confirmation of the sponsor's complete unit or mailing address.

(2) Violations by juveniles are reported on an MPR, which is forwarded to the United States Magistrate Court prosecutor.

(3) The United States Magistrate Court prosecutor sends a warning through the chain of command to the sponsor.

c. Guests of military members and other authorized AAFES patrons:

(1) Guests of military members and other authorized AAFES patrons are subject to prosecution and bar from post.

(2) The United States Magistrate Court prosecutor sends a warning or summons to the offender.

d. Civilians entering AAFES facilities illegally are subject to bar from post.

### **Chapter 3 Suspension**

#### **3-1. Suspension of post exchange (PX) privileges**

Suspension of PX privileges is directed by the Garrison Commander.

a. The DMWR shoplifting liaison will prepare memorandums and letters of notification of suspension of PX privileges for the Garrison Commander's signature.

b. If the offender is an active duty Soldier, memorandums are forwarded through the offender's chain of command to the unit commander.

c. For cases involving Family members of active duty Soldiers, the memorandum will be addressed to the sponsor and will be forwarded through the sponsor's chain of command.

d. For cases involving retirees and Family members of retirees, letters will be mailed to the off-post residence. Letters for Family members of retirees will be addressed to the retiree sponsor.

e. If a unit address is not identified for an active duty offender or active duty sponsor in the MPR, a letter will be mailed to the offender's civilian address. In the case of Family members, the letter will be addressed to the sponsor.

f. Memorandums and letters will state the date of the incident, duration of suspension, amount of loss/recovery, restrictions, and offenders' right to appeal.

g. Copies of memorandums and letters of suspension will be forwarded to the Fort Hood identification (ID) card section and AAFES. Copies of the memorandums, letters, and MPRs will be retained on file for a period specified in Chapter 3, section 3-3c of this regulation.

**3-2. Confiscation and issuance of new identification (ID) card**

- a. Active duty Soldiers, retirees, and Family members will have their ID cards confiscated.
- b. Fort Hood (FH) Form 640-X3, Confiscation of ID Card, (see Appendix B) will be issued to offender upon confiscation of ID card and is valid as a temporary form of identification for a period of 15 days.
- c. A new ID card can be obtained from the ID card section indicating only those privileges allowed during the suspension period.
- d. Suspension period begins on the date of the offense.

**3-3. Suspension periods**

- a. PX privileges will be suspended for a period of one year for first time offense.
- b. PX privileges will be suspended indefinitely for second offense. Offender is subject to possible bar from post and eviction from post housing or quarters.
- c. A copy of each MPR and memorandum or letter will be kept on file by the DMWR shoplifting liaison for a period of two years for first offense and indefinitely for second offense. Upon expiration of file retention, files will be destroyed.

**3-4. Reinstatement of privileges**

Individuals whose privileges have been suspended may appeal the suspension to the Garrison Commander. Appeals may be made through appropriate command channels to Garrison Commander, Installation Management Command, Headquarters, US Army Garrison within ten working days after receipt of letter or memorandum.

- a. Appeals will be made in written or typed form addressed to the Garrison Commander and will be processed through the DMWR shoplifting liaison.
- b. If the request for reinstatement is approved, the offender will receive a new ID card with restored PX privileges.
- c. If the request for reinstatement is denied, suspension will remain in affect for the period indicated.

**Appendix A**  
**References**

**Section I. Required Publications**

This section not used.

**Section II. Related Publications**

This section not used.

**Section III. Prescribed Forms**

This section not used.

**Section IV. Referenced Forms**

**DA Form 3975**

Military Police Report

**DA Form 4833**

Commanders Report of Disciplinary or Administrative Action

**Fort Hood Form 640-X3**

Confiscation of ID Card

**Fort Hood Form 1853**

Distribution Scheme

**Appendix B  
Fort Hood Form 640-X3 (Confiscation of ID Card)**

<b>CONFISCATION OF IDENTIFICATION (ID) CARD</b> <small>(AR 600-8-14)</small>	
<p>1. _____  <div style="text-align: center;">(Full Name)</div>   <div style="display: flex; justify-content: space-around;"> <div style="text-align: center;">_____ (SSN)</div> <div style="text-align: center;">_____ (SPONSORS' SSN)</div> </div>             had his / her ID card confiscated on _____            IAW AR 600-8-14 / FH REG 210-4 (Date)         </p> <p>by _____ due to:  <div style="text-align: center;">(Confiscating Agency)</div> </p> <p>a. <input type="checkbox"/> Expiration (Date expired _____ )</p> <p>b. <input type="checkbox"/> Mutilation (Photo is accessible)</p> <p>c. <input type="checkbox"/> Obviously Modified</p> <p>d. <input type="checkbox"/> Fraudulent use (Explain) _____            _____</p>	
<p>2. You must present this form and another type of picture identification when applying for a new ID card. All personnel and their eligible family members should report to the Installation ID Card Section located in the Copeland Soldiers Service Center, building 18010, room B115 to obtain a replacement ID card. Sponsors <b>MUST</b> accompany all family members to receive a new ID card or the family member <b>MUST</b> have a valid Power of Attorney to be issued an ID card. This form cannot be used to obtain a new ID card.</p>	
<p>3. Any questions / problems should be directed to the Installation ID Card Section, located in the Copeland Soldiers Service Center, building 18010, room B115, phone 287-2518 or 287-5670.</p>	
SIGNATURE BLOCK	SIGNATURE

FHT Form 640-X3, January 2007 (DES)

**Appendix C**  
**DA Form 3975 (Military Police Report)**

<b>MILITARY POLICE REPORT</b>			
For use of this form, see AR 190-45; the proponent agency is DDCSOPS			
<b>PRIVACY ACT STATEMENT</b>			
<b>AUTHORITY:</b>		Title 10 USC Section 301; Title 5 USC Section 2951; E.O. 9397 dated November 22, 1943 (SSN).	
<b>PRINCIPAL PURPOSE:</b>		To provide commanders and law enforcement officials with means by which information may be accurately identified.	
<b>ROUTINE USES:</b>		Your social security number is used as an additional/alternate means of identification to facilitate filing and retrieval.	
<b>DISCLOSURE:</b>		Disclosure of your social security number is voluntary.	
<b>MILITARY POLICE REPORT NUMBER</b>		<b>DATE (YYYYMMDD)</b>	<b>ORI NUMBER</b>
<b>THRU</b>		<b>TO</b>	<b>FROM</b>
<b>SECTION I - ADMINISTRATION</b>			
<b>1. REPORT TYPE</b>		<b>3. EVALUATION</b>	
<input type="checkbox"/> Information <input type="checkbox"/> Traffic <input type="checkbox"/> Military Offense <input type="checkbox"/> Criminal <input type="checkbox"/> Complaint		<input type="checkbox"/> Founded <input type="checkbox"/> Unfounded	
<b>2. STATUS</b>		<b>4a. COMPLAINT DATE (YYYYMMDD)</b>	
<input type="checkbox"/> Initial <input type="checkbox"/> Supplemental <input type="checkbox"/> Cdr's Action		<input type="checkbox"/> In Person <input type="checkbox"/> 911 <input type="checkbox"/> CB <input type="checkbox"/> Telephone <input type="checkbox"/> Mail <input type="checkbox"/> Radio <input type="checkbox"/> Crime Stoppers <input type="checkbox"/> Alarm <input type="checkbox"/> OTHER (Specify) <input type="checkbox"/> Referral	
		<b>4b. COMPLAINT TIME (24 HR)</b>	
		<b>5a. CLEARANCE REASON</b>	
		<input type="checkbox"/> A Death of Offender <input type="checkbox"/> B Prosecution Declined <input type="checkbox"/> C Extradition Declined <input type="checkbox"/> D Victim Refused to Cooperate <input type="checkbox"/> E Juvenile, No Custody <input type="checkbox"/> U Unfounded <input checked="" type="checkbox"/> X Apprehension	
		<b>5b. EXCEPTIONAL CLEARANCE DATE (YYYYMMDD)</b>	
		<b>7. INVOLVEMENT</b>	
		<input type="checkbox"/> Hate <input type="checkbox"/> Domestic <input type="checkbox"/> Death <input type="checkbox"/> Gang <input type="checkbox"/> Trainee <input type="checkbox"/> Extremist	
		<b>6a. MP ACTION</b>	
		<input type="checkbox"/> MPI <input type="checkbox"/> Civil Authorities <input type="checkbox"/> CID <input type="checkbox"/> Traffic <input type="checkbox"/> MP <input type="checkbox"/> OTHER (Specify)	
		<b>6b. DATE REFERRED (YYYYMMDD)</b>	
<b>SECTION II - OFFENSE (For additional offenses, complete DA Form 3975-1)</b>			
<b>1a. OFFENSE NO.</b>	<b>1b. SUBJECT NO. INVOLVEMENT</b>	<b>1c. VICTIM NO. INVOLVEMENT</b>	<b>1d. NIBRS LOCATION CODE</b>
			<input type="checkbox"/> ATTEMPTED <input type="checkbox"/> COMPLETED
<b>1g. OFFENSE CODE(s)</b>	<b>1h. OFFENSE DESCRIPTION(s)</b>		<b>1f. SAME OFFENSE DATA FOR ALL OFFENSE CODES</b>
			<input type="checkbox"/> YES <input type="checkbox"/> NO See DA Form 3975-1
			<b>1i. OFFENSE LOCATION ADDRESS</b>
<b>2a. BEGIN DATE (YYYYMMDD)</b>	<b>3. TYPE OF CRIMINAL ACTIVITY (Check up to three)</b>		<b>4. OFFENSE STATUTORY BASIS</b>
	<input type="checkbox"/> B Buying/Receiving <input type="checkbox"/> C Cultivating/Manufacturing/Publishing <input type="checkbox"/> D Distributing/Selling <input type="checkbox"/> E Exploiting Children <input type="checkbox"/> O Operating/Promoting/Assisting <input type="checkbox"/> P Possessing/Concealing <input type="checkbox"/> T Transporting/Importing <input type="checkbox"/> U Using/Consuming		<input type="checkbox"/> A UCMJ <input type="checkbox"/> B Non-Criminal Fatality <input type="checkbox"/> C State <input type="checkbox"/> D Local <input type="checkbox"/> E Foreign <input type="checkbox"/> F Federal, Non-UCMJ
<b>2b. BEGIN TIME (24 Hour)</b>			<b>5. OFFENDER USED (Check up to three)</b>
			<input type="checkbox"/> A Alcohol <input type="checkbox"/> C Computer Equipment <input type="checkbox"/> D Drugs/Narcotics <input type="checkbox"/> N Not Applicable
<b>2c. END DATE (YYYYMMDD)</b>			
<b>2d. END TIME (24 Hour)</b>			
<b>NATIONAL INCIDENT BASED REPORTING SYSTEM (NIBRS) LOCATION CODES (Section II, Block 1d)</b>			
01 Air/Bus/Train Terminal	10 Field/Woods/Training Area	19 Rental/Storage Facility	
02 Bank/Credit Union	11 Government/Public Building	20 Residence/Quarters/Barracks/BEQ/BOQ	
03 Bar/Officer/NGO Club	12 Grocery Store/Commissary	21 Restaurant/Dining Facility	
04 Church/Synagogue Temple	13 Highway/Road/Alley/Street	22 School/College	
05 Commercial Office Building	14 Hotel/Motel/VAQ/VEQ/TLQ	23 Service/Gas Station	
06 Construction Site	15 Jail/Prison/Corrections Facility	24 Specialty Store/Concessionaire	
07 Convenience Store/Shoppette	16 Lake/Waterway/Ocean	25 Child Care Facility/Home Day Care	
08 Dept/Discount Store/Exchange	17 Liquor Store/Class VI	26 Recreation Area/Park	
09 Drug Store/Hospital/Clinic	18 Motor Pool/Parking Lot/Garage	27 Training Center/Service School	
		28 On Board Ship	

**Appendix D**  
**DA Form 4833 (Commanders Report of Disciplinary or Administrative Action)**

<b>COMMANDER'S REPORT OF DISCIPLINARY OR ADMINISTRATIVE ACTION</b> For use of this form, see AR 190-45; the proponent agency is Office of the Provost Marshal General			SUSPENSE DATE (YYYYMMDD)
<b>PRIVACY ACT STATEMENT</b>			
<b>AUTHORITY:</b> Title 10 USC Section 301; Title 5 USC Section 2951; E.O. 9397 dated November 22, 1943 (SSN). <b>PRINCIPAL PURPOSE:</b> To provide commanders and law enforcement officials with means by which information may be accurately identified. <b>ROUTINE USES:</b> Your social security number is used as an additional/alternate means of identification to facilitate filing and retrieval. <b>DISCLOSURE:</b> Disclosure of your social security number is voluntary.			
1. THRU	2. TO		3. FROM
4. USACRC CONTROL NUMBER	5. MP REPORT NUMBER		6. SUB-INSTALLATION IDENTIFIER
<p>The first Lieutenant Colonel in the chain of command is responsible and accountable for completing DA Form 4833 with support documentation (copies of Article 15s, court-martial orders, reprimands, etc) for all USACIDC investigations. The unit and brigade commander or their equivalent will also receive a copy of the DA Form 4833 for all USACIDC investigations.</p> <p>Company, troop, and battery level commanders are responsible and accountable for completing DA Form 4833 with supporting documentation in all cases investigated by MPI, civilian detectives employed by the Department of the Army, and the PMO. Accurate and complete DA 4833 disposition reports are required to meet installation, command, HQDA, DOD, and federal statutory reporting requirements. The data is used to identify crime trends, establish command programs in law enforcement and other activities, and to ensure that resources are made available to support commanders who must address issues of soldier and family member indiscipline.</p> <p>In court-martial cases, a conviction of an offense at court-martial may be for a different, or lesser included offense. List the offense for which the individual was convicted at court-martial in the remarks section.</p> <p>Block 5. Provost Marshals must enter the Military Police Report number for all cases referred to commanders.</p> <p>Block 6. This block is used to enter report number from a civilian law enforcement agency police report. Other information on the civilian law enforcement agency (e.g. civilian law enforcement agency address) may be entered in the remarks section.</p>			
7. NAME OF SUBJECT (Last, First, MI)	8. GRADE	9. SSN	10. DATE OF BIRTH (YYYYMMDD)
11a. OFFENSE(s)	11b. DATE OF OFFENSE(s) (YYYYMMDD)	11c. ACTION TAKEN	11d. IF NO ACTION TAKEN, EXPLAIN:
		YES <input type="checkbox"/> NO <input type="checkbox"/>	
		YES <input type="checkbox"/> NO <input type="checkbox"/>	
		YES <input type="checkbox"/> NO <input type="checkbox"/>	
<b>12. ACTION TAKEN (check all that apply)</b> * Subject was advised that although no action was taken, the report would be retained in Army records and that requests for amendment, correction, or expungement may be submitted IAW AR 190-45 (MP Reports) or AR 195-2 (CID Reports).			
<input type="checkbox"/> a. NON-ADVERSE PERSONNEL ACTION REFERRAL: REFERRED TO (Check appropriate blocks)      DATE REFERRED (YYYYMMDD)      DATE RESPONDED (YYYYMMDD)			
F = FAMILY ADVOCACY			
D = DRUG/ALCOHOL ABUSE			
S = SPECIAL REFERRAL			
E = EQUAL OPPORTUNITY			
L = LEGAL OFFICE			
M = MENTAL HEALTH			
R = RELIEF AGENCY			
<input type="checkbox"/> b. ADVERSE PERSONNEL ACTION:			
<input type="checkbox"/> REPRIMAND	<input type="checkbox"/> ORAL	<input type="checkbox"/> WRITTEN	
		FILED: <input type="checkbox"/> LOCALLY	<input type="checkbox"/> OMPF
<input type="checkbox"/> LETTER OF CONCERN/COUNSELING			
<input type="checkbox"/> ADVERSE OER/NCOER COMMENT			
<input type="checkbox"/> RELIEF FOR CAUSE OER/NCOER			
<input type="checkbox"/> SUSPENDED SECURITY CLEARANCE OR OTHER ADVERSE ACTION REGARDING SECURITY CLEARANCE			
<input type="checkbox"/> DISCHARGE PURSUANT TO AR 635-200 (ENLISTED)/AR 600-8-24 (OFFICER)			
Regulation _____	Chapter _____	Characterization _____	Discharge Date _____
<input type="checkbox"/> c. NONJUDICIAL PUNISHMENT (Article 15, UCMJ) (ATTACH COPY OF ARTICLE 15)			
<input type="checkbox"/> SUMMARIZED	<input type="checkbox"/> FIELD GRADE	<input type="checkbox"/> GCMCA IMPOSED	
<input type="checkbox"/> COMPANY GRADE	<input type="checkbox"/> GENERAL OFFICER IMPOSED		
<input type="checkbox"/> d. JUDICIAL (If subject was tried by court-martial attach a copy of the court-martial order giving findings and sentences.)			
<input type="checkbox"/> SUMMARY COURT MARTIAL	<input type="checkbox"/> GENERAL COURT-MARTIAL		
<input type="checkbox"/> SPECIAL COURT-MARTIAL	<input type="checkbox"/> CIVILIAN OR MAGISTRATE CRIMINAL COURT		



**Glossary**

**Section I. Abbreviations**

**AAFES**

Army and Air Force Exchange Service

**ATTN**

Attention

**DA**

Department of the Army

**DCA**

Directorate of Community Activities

**DES**

Directorate of Emergency Services

**DMWR**

Directorate of Morale, Welfare, and Recreation

**FH**

Fort Hood

**IAW**

In Accordance With

**ID**

Identification

**MP**

Military Police

**MPR**

Military Police Report

**PMO**

Provost Marshall's Office

**PX**

Post Exchange

**UCMJ**

Uniform Code of Military Justice

7 June 2007

III CORPS & FH REG 210-4

**Section II. Terms**

This section not used.