DEPARTMENT OF THE ARMY
ORGANIZATIONAL NAME/TITLE
STANDARDIZED STREET ADDRESS
CITY, STATE, AND ZIP + 4 CODE

OFFICE SYMBOL Date-

MEMORANDUM THRU Xxxxxxxxxxxxxxxxxxxxxxxxxxxx

FOR Xxxxxxxxxxxxxxxxxxxxxxxxxxxx

SUBJECT: Appointment Of Investigating Officer

1. Effective (Date), (Name), (SSN) is hereby appointed as an Investigating Officer.

2. Authority: AR 600-8-1, Line Of Duty Investigation.

3. Purpose: To perform a Line Of Duty Investigation IAW AR 600-8-4, obtaining the details pertaining to the injuries of (Name), (SSN), (Unit) that occurred in (Location) on (Incident Date).

4. Period: Until the investigation is completed and no further investigation is required, unless released sooner by the appointing authority.

5. Special instructions: Conduct of this investigation will be your primary duty until the investigation is submitted to the appointing authority. Your findings will be supported by substantial evidence and by a greater weight of evidence than supports any different conclusion. Your report of investigation will be submitted to this Headquarters NLT (Date).

FOR THE ADJUTANT GENERAL, (STATE OR TERRITORY)

(Signature Block)