DATE:			

SCARNG IG ASSISTANCE REQUEST FORM

Name	Cell	Email
		Office
Have you already contact	ted an IG regarding this issue?	If yes, whom?
2. Are you receiving assista	ance from a member of Congress?	If yes, whom?
•	concern with your Chain of Comm	nand? Phone #
1SG		Phone #
		Phone #
4. Do you have supporting	documentation? Is it attached	d?
5. Have you spoken to any	one else regarding this situation?	If yes, whom?
	nission to use your name on your ton relevant to your issue(s)?	pehalf? Initials
Name Name Name	F	Phone #Phone Phone #Phone Phone Phon

8. What is your status?

NOTE: On the DA 1559 and the back of this form, describe all factual circumstances involving your complaint/issue(s). Include dates, times, places, and names. Include additional sheets of paper if you need more room or complete an electronic DA 1559. Email all documents with your comments in the email body to any SCARNG IG located on the following page: https://gko.portal.ng.mil/states/SC/CMDGRP/SpecialStaff/inspectorgeneral/SitePages/IG%20STAFF.aspx