## **SUMMARY COURT MARTIAL OFFICER CHECKLIST** For use of this form, see DA PAM 638-2; the proponent agency is ODCSPER INITIAL BLOCKS WHEN COMPLETED 1. INFORMATION Provide SCMO appointment order Review authority Review jurisdiction Review limitations Review SCMO duties as prescribed in AR 638-2, Chapter 18 Review submission of required documents and reports Provide point of contact at CAC Provide point of contact at Disposition Branch Provide SCMO with copy of AR 638-2, Chapters 17, 18, 19 and 20 Provide SCMO with copy of DA PAM 638-2, Chapters 11 through 16 2. FORMS DA Form 54-R (Record of Personal Effects) DA Form 4160 (Patient's Personal Effects and Clothing Record) DD Form 1076 (Military Operations Record of Personal Effects of Deceased Personnel) 3. REPORTS Review timeline for submission of required reports. 4. OTHER 5a. SIGNATURE OF SCMO 5b. DATE (YYYYMMDD)

6a. SIGNATURE OF BRIEFER

6b. DATE (YYYYMMDD)