DISPOSITION BOARD RECO	MMENDATION	REPORT DATE (YYYYMMDD)
1. NAME (Last, First, Middle)		2. REGISTRATION NUMBER
3. CORRECTIONAL FACILITY/BRIG		
4. DEAGON FOR DOADD ACTION (4)		
4. REASON FOR BOARD ACTION (X one) a. CLEMENCY	d. PAROLE	
b. RESTORATION/RETURN TO DUTY	 e. Supplemental/Special Clemency	,
c. MANDATORY SUPERVISED RELEASE	f. OTHER	
5. RECOMMENDATION]	
a. CLEMENCY		
b. RESTORATION/RETURN TO DUTY		
c. MANDATORY SUPERVISED RELEASE		
d. PAROLE		
e. SUPPLEMENTAL/SPECIAL CLEMENCY		
f. OTHER		
6.a. TYPED NAME AND GRADE OF RECORDER	b. SIGNATURE	c. DATE (YYYYMMDD)
7.a. TYPED NAME AND GRADE OF BOARD CHAIRMAN	b. SIGNATURE	c. DATE (YYYYMMDD)
8.a. RECOMMENDATION OF THE CORRECTIONAL FACILIT	Y/BRIG COMMANDER	<u>'</u>
b. TYPED NAME AND GRADE OF CORRECTIONAL FACILIT	Y/BRIG c. SIGNATURE	d. DATE (YYYYMMDD)