



**DEPARTMENT OF THE ARMY
US ARMY INSPECTOR GENERAL AGENCY
1700 ARMY PENTAGON
WASHINGTON DC 20310-1700**

SAIG-JAR

17 November 2025

MEMORANDUM FOR U.S. Army Reserve Command, Attn: AFRC-PRS (FOIA/Privacy Act),
Building 8-1808, 4710 Knox Street, Fort Bragg, NC 28310

SUBJECT: Referral of Freedom of Information Act (FOIA) Request from [REDACTED]

1. While processing the subject FOIA request, we determined that the request may fall under your purview. The enclosed documents are forwarded for your release determination, approval by your Initial Denial Authority, and direct response to the requester.
2. If you have any questions concerning this action, please contact our office via email: usarmy.pentagon.hqda-otig.mbx.saig-zxl@army.mil. Please refer to Case Number [REDACTED] in the subject of your email.

SALLIS.YVONNE.L
ESLEY.111404575
2

Digitally signed by
SALLIS.YVONNE.LESLEY.1114
045752
Date: 2025.11.17 14:21:13
-05'00'

YVONNE L. SALLIS
LTC, JA
Legal Advisor

2 Encls

1. FOIA Request
2. FOIA Response Letter

CF: Ms. [REDACTED] (w/o encls)

Freedom of Information Act Office



Greetings:

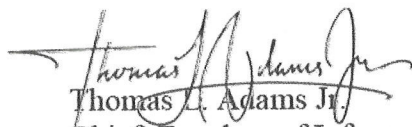
This letter is in response to your Freedom of Information Act request for “the entire investigation (paper, electronic, voice recordings) conducted by Dashawn Adam’s, former s3 agree-marsg investigation”. Your request has been processed in accordance with Title 5 United States Code 552, The Freedom of Information Act and Title 5 United States Code 552a, The Privacy Act. Your request was assigned case number FA-[REDACTED]

Your FOIA request is being referred to the Army Reserve Medical Command, the U.S. Army's custodians of the requested records. You will get a direct response and a new case number from the respective office, which may be contacted at:

Army Reserve Medical Command
ATTN: FOIA/PA Action Officer
2801 Grand Avenue
Pinellas Park, Florida 33782-6140
727-563-3810
joseph.a.walser.civ@army.mil

If you have any questions or concerns, you may contact Mrs. Kimberly Pettaway at (910) 570-8162 or usarmy.usarc.usarc-hq.mbx.foia@mail.mil.

Sincerely,


Thomas L. Adams Jr.
Chief, Freedom of Information
Privacy Act Office



Thank you for visiting FOIA.gov, the government's central website for FOIA. We'll continue to make improvements to the site and look forward to your input. Please submit feedback to National.FOIAPortal@usdoj.gov.

Submission ID: 

Success!

Your FOIA request has been created and is being sent to the Administrative Conference of the United States.

You'll hear back from the agency confirming receipt in the coming weeks using the contact information you provided. If you have questions about your request, feel free to reach out to the agency FOIA personnel using the information provided below.

Contact the agency



Shawne McGibbon, General Counsel & Chief FOIA Officer

202-480-2080

smcgibbon@acus.gov



Nathan Tomasso, FOIA Requester Service Representative


202-480-2080

ntomasso@acus.gov

 Nathan Tomasso, Requester Service Center Representative


202-480-2080


ntomasso@acus.gov

 Shawne McGibbon, Chief FOIA Officer
1120 20th Street, NW, Suite 706 South
Washington, DC 20036

Request summary

Request submitted on **April 15, 2025**.

The confirmation ID for your request is 

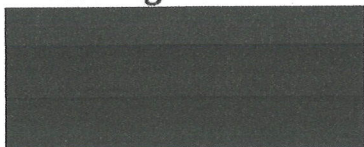
 The confirmation ID is only for identifying your request on FOIA.gov and acts as a receipt to show that you submitted a request using FOIA.gov. This number does not replace the information you'll receive from the agency to track your request. In case there is an issue submitting your request to the agency you selected, you can use this number to help.

Contact information

Name



Mailing address



United States

Phone number

[REDACTED]

Company/organization

USAR

Email

[REDACTED]

Your request

review of the process, any and all documents or correspondence re: 1.) CID case number - [REDACTED] 2.) Freedom of Information Act (FOIA) request dated July 3, 2024; assigned US Army Reserve Command case number FA-2 [REDACTED] and case number FA-2 [REDACTED]. 3.) IG DOD WHISTLEBLOWER COMPLAINTS. 4.) military congressional inquiry process re: [REDACTED] 5.) red dress 6.) open door policies 7.) military administrative separation process/ "active" appeals prior/post separation 8.) military promotions process and clean up for those not qualified. 9.) conflict of interest and abuse of position(s). I.e., corrections officers on leave collecting active military leave status and getting step ups in pay, throughout the duration of the service members time in service. While simultaneously collecting pay from the military. (Some work/some just get civilian ed. credits and never do their job). 10.) conflicts of interest with military TDS. Failing to remain UNBIASED in a position of trust as a "guardian of the judicial process" as stated in their oath. Fort Leonard Wood TDS office failed to assist with admin discharge appeal prior to separation date and after. 11.) discharge upgrade process for situations like mine where ucmj/criminal/admin sep discharge code3 legal aids are reluctant or do not contain the knowledge required of the process to assist with the discharge upgrade process. To include Paul Weiss firm. Jeremy Benjamin and Steve banks.

Additional information

 VA WHISTLEBLOWER COMPLAINT .pdf

Fees

What type of requester are you?

other

Fee waiver

yes

Fee waiver justification

Transcripts should not be redacted for public info IOT show transparency from both sides. disclosure of the requested information is in the public interest because it is likely to contribute significantly to public understanding of the operations and activities of the government and is not primarily in the commercial interest of the requester.

The amount of money you're willing to pay in fees, if any

0

Request expedited processing

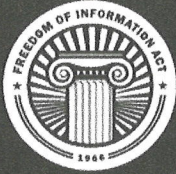
Expedited processing

yes

Justification for expedited processing

My family and I have been financially, emotionally, mentally impacted by the unlawful admin


separation process and the gross blatant negligence within the leadership and current staff personnel in all government (and non-government agencies.)




FOIA.gov

CONTACT

Office of Information Policy (OIP)
U.S. Department of Justice
441 G St, NW, 6th Floor
Washington, DC 20530
E-mail: National.FOIAPortal@usdoj.gov

[Hero image credit](#)  CC3.0

- | [FREQUENTLY ASKED QUESTIONS](#)
- | [DEVELOPER RESOURCES](#)
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- | [POLICIES & DISCLAIMERS](#)
- | [JUSTICE.GOV](#)
- | [USA.GOV](#) 



July 3, 2025—Sent via email

[REDACTED]

Dear [REDACTED]

Thank you for contacting the Office of Government Information Services (OGIS), an office in the National Archives and Records Administration. Congress created OGIS to serve as the federal Freedom of Information Act (FOIA) Ombuds. We assist the public and federal agencies by helping them resolve their FOIA disputes, and by addressing their questions and concerns about the FOIA process. The FOIA directs agencies to include information about OGIS in all adverse FOIA response letters, including those related to processing delays.

We understand that you have contacted the Department of the Army (DA) to obtain information regarding the status of your pending FOIA request but have received no reply. You seek assistance from OGIS.

The FOIA requires agencies to provide a means of communication between the agency and the requester so that the requester can determine the status of their case and its anticipated completion date (5 U.S.C. § 552(a)(7)(B)). Please be aware that OGIS does not have access to individual agency case management systems and therefore cannot independently provide you with the status of your request and/or an estimated date of completion. When FOIA requesters reach out to OGIS regarding a delay, OGIS works to open the lines of communication between the requester and the agency. If an agency chooses not to respond to a request for status information, OGIS cannot compel it to do so. However, in our role as the FOIA Ombuds, we are forwarding this response to DA FOIA staff so that they are aware that you are attempting to communicate with them.

Thank you for bringing this matter to our attention, as it assists us with our review of agency compliance with the FOIA. If you have questions or concerns that we have not addressed, please contact us again.

Best regards,
The OGIS Staff

cc: DA FOIA Staff



**DEPARTMENT OF THE ARMY
US ARMY INSPECTOR GENERAL AGENCY
1700 ARMY PENTAGON
WASHINGTON, DC 20310-1700**

SAIG-JAR (25-55a1)

14 August 2025

MEMORANDUM FOR U.S. Army Crime Records Center ATTN: CICR-FP, Russell Knox Building, 27130 Telegraph Road, Quantico, VA 22134-2253

SUBJECT: Referral of Freedom of Information Act Request – [REDACTED]
[REDACTED]

1. While processing the subject request, we determined that a portion of this request may fall under your purview. The attached documents are forwarded for your release determination, approval by your Initial Denial Authority, and direct response to the requester.

2. If you have any questions regarding this matter, please contact our office via email: usarmy.pentagon.hqda-otig.mbx.saig-zxl@army.mil. Please refer to Case Number [REDACTED] in the subject of your email.

2 Encls

1. FOIA Request
2. FOIA Response

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YVONNE L. SALLIS
LTC, JA
Legal Advisor

CF:

[REDACTED] e (w/o encls)



USARMY Ft Belvoir HQDA ES..

To: & 4 more... >

FOIA ASSISTANCE REQUEST - [UNCLASSIFIED]

UNCLASSIFIED

Greetings Mrs. (PVT)

As you are aware, your request has been processed and forwarded to the Initial Denial Authority for a release determination. While Army is working to provide the requested information in accordance with the parameters of the Freedom of Information Act, Army is steadily working through a major period of transition. You may or may not be aware that the current administration has enacted a series of executive orders that have significantly reshaped federal operations. These actions include civilian workforce downsizing requiring restructuring plans. As a result, many agencies have implemented hiring freezes which—combined with Deferred Resignation Program (DRP) departures—have led to gaps in staffing. Nevertheless, please be assured that your request remains a priority, and we are working diligently to address it as soon as possible. We appreciate your understanding and will keep you updated on any significant developments.

Thank you
DA FOIA

UNCLASSIFIED

On Jul 3, 2025, at 07:58,

I wrote:

If not will reply in email.... Where's my email
Joyce?

<voicemail-57221219040.m4a>

From:
Subject: Expedite Response - [CUI]
Date: Aug 7, 2025 at 07:51:07
To: usarmy.pentagon.hqda-otig.mbx.saig-zxl@army.mil

My email will be justified through the discovery process if it is entertained at all.

Sent from my iPhone

On Aug 7, 2025, at 07:45, [REDACTED] wrote:

Roger, Thank you for acknowledging receipt.

Mrs. [REDACTED]

Sent from my iPhone

On Aug 7, 2025, at 07:44, USARMY Pentagon HQDA OTIG Mailbox SAIG ZXL <usarmy.pentagon.hqda-otig.mbx.saig-zxl@army.mil> wrote:

CUI

Good morning,

We've sent your email over to our attorney for further review. We will let you know our decision soon.

Respectfully,

Records Release Office

From: [REDACTED]
Sent: Wednesday, August 6, 2025 11:40 AM
To: USARMY Pentagon HQDA OTIG Mailbox SAIG ZXL <usarmy.pentagon.hqda-otig.mbx.saig-zxl@army.mil>
Subject: Re: Expedite Response - [CUI]

Good day,

do you require a counter via memo?

Do you require medical docs to show what effects delay of this has on my heart and mental health? I can provide such docs AGAIN as I did with my congressional complaint and my command team prior to being discharged, that is apart of the investigation I am requesting to be looked into.

A is a consequence of C. And B is apart of it because I need to show congress the lack of faith in command/prosecutorial violation of “authority” and due process that is being denied to soldiers such as myself in regards to the requested foia information and similar admin actions.

As well as lack of leadership from the commanders I attempted to communicate with via open door that prefer to ignore or “delegate” lower enlisted issues to command staff.

And the effects from the conflict of interest with the “appointed” JAG at FLW, MO after my original one PCS'd.

Sorry I'm not better versed with legal jargon to not be further taken advantage of either by my ignorance in judicial process federal and military. I'm trying to get spun up— as failure to fair and due process has affected my ability to obtain ANY legal representation. To best handle all of my legal issues. I require the request for discharge upgrade, va disability retention and for the public's awareness of unfair process for soldiers.

I appreciate your response and am standing by if you require me to type a memo requesting for expedited processing of my request.

Mrs. (Pvt) [REDACTED]

Sent from my iPhone

On Aug 6, 2025, at 10:19, USARMY Pentagon HQDA OTIG Mailbox SAIG ZXL
<usarmy.pentagon.hqda-otig.mbx.saig-zxl@army.mil> wrote:

CUI

Good morning,

Attached is our response to your Expedite Request. Please refer to letter for further information.

Respectfully,

Records Release Office

Controlled by: DAIG

CUI Category: Administrative Proceedings (ADPO)

Limited Dissemination Control: NOCON

POC: USARMY Pentagon HQDA OTIG Mailbox SAIG ZXL :

usarmy.pentagon.hqda-otig.mbx.saig-zxl@army.mil

CUI

<Expedite Response.pdf>

CUI

July 23, 2025

Records Release Office



Dear [REDACTED]

This letter responds to your July 14, 2025 email request for expedited processing of Freedom of Information Act (FOIA) Case Number [REDACTED] (seeking “All IG requests via email or electronic submission of IG requests and whistleblower complaints/CID investigations for or made by [me]”).

Your request for expedited processing is denied. Your request failed to provide sufficient justification for expedited processing under the FOIA. A request for expedited processing must demonstrate to the satisfaction of the Agency that it meets one of the following compelling needs:

- a. Failure to obtain the records on an expedited basis could reasonably be expected to pose an imminent threat to the life or physical safety of an individual.
- b. Information is urgently needed by an individual primarily engaged in disseminating information in order to inform the public concerning actual or alleged federal government activity.
- c. An imminent loss of substantial due process rights or a humanitarian need.

This office processes each request on a “first in, first out” basis, and your request will be processed at the earliest possible date. The approximate date of completion for your request is July 14, 2026. The actual processing time for your request will depend upon the number of prior requests, as well as the complexity and volume of documents to be reviewed for each request received before yours.

You may appeal this determination in writing within 90 days of the date of this letter. If you decide to appeal, please send your appeal through this office—Records Release Office (SAIG-JAR), U.S. Army Inspector General Agency, 1700 Army Pentagon, Room 1E132, Washington, DC 20310-1700—for transmittal to the Office of the General Counsel, Department of the Army. That office has appellate authority for Army Inspector General initial FOIA determinations.

If you have any questions concerning this action, please contact our office via email: usarmy.pentagon.hqda-otig.mbx.saig-zxl@army.mil. Please refer to Case Number [REDACTED] in the subject of your email.

Sincerely,



Yvonne L. Sallis
Lieutenant Colonel, U.S. Army
Legal Advisor

August 14, 2025

Records Release Office



Dear Ms. [REDACTED]

This letter responds to your July 14, 2025 email request for expedited processing of Freedom of Information Act (FOIA) Case Number [REDACTED] (seeking “All IG requests via email or electronic submission of IG requests and whistleblower complaints/CID investigations for or made by (previously SGT/with ARMEDCOM) PVT [REDACTED]”

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~~usarmy.pentagon.mil~~ ~~org.mox.sag.zar@army.mil~~. Please refer to Case Number [REDACTED] in the subject of your email.

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CF:
[REDACTED] e (w/o encls)

SALLIS.YVONN
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USARMY Ft Belvoir HQDA ES...

To: & 4 more... >

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Sincerely,



Yvonne L. Sallis
Lieutenant Colonel, U.S. Army
Legal Advisor

August 14, 2025

Records Release Office



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Records Release Office

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As well as lack of leadership from the commanders I attempted to communicate with via open door that prefer to ignore or "delegate" lower enlisted issues to command staff.

And the effects from the conflict of interest with the "appointed" JAG at FLW, MO after my original one PCS'd.

Sorry I'm not better versed with legal jargon to not be further taken advantage of either by my ignorance in judicial process federal and military. I'm trying to get spun up— as failure to fair and due process has affected my ability to obtain ANY legal representation. To best handle all of my legal issues. I require the request for discharge upgrade, va disability retention and for the public's awareness of unfair process for soldiers.

I appreciate your response and am standing by if you require me to type a memo requesting for expedited processing of my request.

Mrs. (Pvt) [REDACTED]

Sent from my iPhone

On Aug 6, 2025, at 10:19, USARMY Pentagon HQDA OTIG Mailbox SAIG ZXL
<usarmy.pentagon.hqda-otig.mbx.saig-zxl@army.mil> wrote:

CUI

Good morning,

Attached is our response to your Expedite Request. Please refer to letter for further information.

Respectfully,

Records Release Office

Controlled by: DAIG

CUI Category: Administrative Proceedings (ADPO)

Limited Dissemination Control: NOCON

POC: USARMY Pentagon HQDA OTIG Mailbox SAIG ZXL :

usarmy.pentagon.hqda-otig.mbx.saig-zxl@army.mil

CUI

<Expedite Response.pdf>

CUI

July 23, 2025

Records Release Office



Dear [REDACTED]

This letter responds to your July 14, 2025 email request for expedited processing of Freedom of Information Act (FOIA) Case Number [REDACTED] (seeking “All IG requests via email or electronic submission of IG requests and whistleblower complaints/CID investigations for or made by [me]”).

Your request for expedited processing is denied. Your request failed to provide sufficient justification for expedited processing under the FOIA. A request for expedited processing must demonstrate to the satisfaction of the Agency that it meets one of the following compelling needs:

- a. Failure to obtain the records on an expedited basis could reasonably be expected to pose an imminent threat to the life or physical safety of an individual.
- b. Information is urgently needed by an individual primarily engaged in disseminating information in order to inform the public concerning actual or alleged federal government activity.
- c. An imminent loss of substantial due process rights or a humanitarian need.

This office processes each request on a “first in, first out” basis, and your request will be processed at the earliest possible date. The approximate date of completion for your request is July 14, 2026. The actual processing time for your request will depend upon the number of prior requests, as well as the complexity and volume of documents to be reviewed for each request received before yours.

You may appeal this determination in writing within 90 days of the date of this letter. If you decide to appeal, please send your appeal through this office—Records Release Office (SAIG-JAR), U.S. Army Inspector General Agency, 1700 Army Pentagon, Room 1E132, Washington, DC 20310-1700—for transmittal to the Office of the General Counsel, Department of the Army. That office has appellate authority for Army Inspector General initial FOIA determinations.

If you have any questions concerning this action, please contact our office via email: usarmy.pentagon.hqda-otig.mbx.saig-zxl@army.mil. Please refer to Case Number [REDACTED] in the subject of your email.

Sincerely,



Yvonne L. Sallis
Lieutenant Colonel, U.S. Army
Legal Advisor

August 14, 2025

Records Release Office



Dear Ms. [REDACTED]

This letter responds to your July 14, 2025 email request for expedited processing of Freedom of Information Act (FOIA) Case Number [REDACTED] (seeking “All IG requests via email or electronic submission of IG requests and whistleblower complaints/CID investigations for or made by (previously SGT/with ARMEDCOM) PVT [REDACTED]”

Your request for expedited processing is denied. Your request failed to provide sufficient justification for expedited processing under the FOIA. A request for expedited processing must demonstrate to the satisfaction of the Agency that it meets one of the following compelling needs:

- a. Failure to obtain the records on an expedited basis could reasonably be expected to pose an imminent threat to the life or physical safety of an individual.
- b. Information is urgently needed by an individual primarily engaged in disseminating information in order to inform the public concerning actual or alleged federal government activity.
- c. An imminent loss of substantial due process rights or a humanitarian need.

This office processes each request on a “first in, first out” basis, and your request will be processed at the earliest possible date. The approximate date of completion for your request is July 14, 2026. The actual processing time for your request will depend upon the number of prior requests, as well as the complexity and volume of documents to be reviewed for each request received before yours.

You may appeal this determination in writing within 90 days of the date of this letter. If you decide to appeal, please send your appeal through this office—Records Release Office (SAIG-JAR), U.S. Army Inspector General Agency, 1700 Army Pentagon, Room 1E132, Washington, DC 20310-1700—for transmittal to the Office of the General Counsel, Department of the Army. That office has appellate authority for Army Inspector General initial FOIA determinations.

The portion of your request for "CID investigations" does not fall under the purview of the Army Inspector General. Therefore, this portion of your request has been forwarded to the U.S. Army Crime Records Center. A copy of our referral memorandum is enclosed.

If you have any questions concerning this action, please contact our office via email: usarmy.pentagon.hqda-otig.mbx.saig-zxl@army.mil. Please refer to Case Number [REDACTED] in the subject of your email.

Sincerely,



Yvonne L. Sallis
Lieutenant Colonel, U.S. Army
Legal Advisor

Enclosure

UNITED STATES POSTAL SERVICE®

CUSTOMER'S RECEIPT

SEE BACK OF THIS RECEIPT FOR IMPORTANT CLAIM INFORMATION NOT NEGOTIABLE	Pay to <u>USARC G-1 AHN FOIA OFFICE</u>	KEEP THIS RECEIPT FOR YOUR RECORDS
	Address: <u>4310 Knox St. East Bangor, ME</u>	
Postal Number: <u>28310-5010</u>	Year, Month, Day: <u>2025-04-14</u>	Post Office: <u>[REDACTED]</u>
	Amount: <u>\$270.75</u>	Clerk: <u>30</u>

UNITED STATES POSTAL SERVICE®

CUSTOMER'S RECEIPT

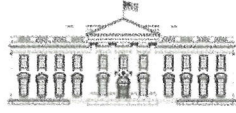
SEE BACK OF THIS RECEIPT FOR IMPORTANT CLAIM INFORMATION NOT NEGOTIABLE	Pay to	KEEP THIS RECEIPT FOR YOUR RECORDS
	Address	
Postal Number: <u>[REDACTED]</u>	Year, Month, Day: <u>2025-04-14</u>	Post Office: <u>[REDACTED]</u>
	Amount: <u>\$1,000.00</u>	Clerk: <u>30</u>

UNITED STATES POSTAL SERVICE®

CUSTOMER'S RECEIPT

SEE BACK OF THIS RECEIPT FOR IMPORTANT CLAIM INFORMATION NOT NEGOTIABLE	Pay to	KEEP THIS RECEIPT FOR YOUR RECORDS
	Address	
Postal Number: <u>[REDACTED]</u>	Year, Month, Day: <u>2025-04-14</u>	Post Office: <u>[REDACTED]</u>
	Amount: <u>\$1,000.00</u>	Clerk: <u>30</u>

From: The White House(imailagent) noreply@contact.whitehouse.gov
Subject: Response to your message (Intranet Quorum IMA00)
Date: Sep 4, 2025 at 10:26:05
To: [REDACTED]



THE WHITE HOUSE

WASHINGTON

September 4, 2025

Thank you for taking the time to write and share your story with President Donald J. Trump. After careful review, we have provided the appropriate federal government agency with a copy of your letter for possible assistance or further action.

For additional information about Federal government services, please visit www.U.S.A.gov or call [1-800-FED-INFO](tel:1-800-FED-INFO).

Sincerely,

The Office of Presidential Correspondence

PUBLIC COPY- SEALED MATERIAL REDACTED



DEPARTMENT OF THE ARMY
OFFICE OF THE DEPUTY CHIEF OF STAFF, G-1
300 ARMY PENTAGON
WASHINGTON, DC 20310-0300

September 18, 2025

Management Support Office



Dear Ms. [REDACTED]

We are in receipt of your letter addressed to President Trump. As much as he would like to, President Trump cannot reply personally to every communication he receives. Therefore, he has asked the Departments and Agencies of the Federal Government to reply on his behalf in those instances where they have special knowledge or authority under the law. For this reason, your correspondence was forwarded to our agency.

Specifically, your July 1, 2025, letter was forwarded to the Deputy Chief of Staff (DCS), G-1 for response in our capacity as the Initial Denial Authority (IDA) for your Freedom of Information Act (FOIA) request.

FOIA requests are processed in queue based on a first-in, first-out concept. We are processing your FOIA request and apologize that it has taken longer than expected. We will provide a final IDA determination to you once we have completed our review of your FOIA request.

My point of contact is Ms. Nancy King, she may be contacted at nancy.king.civ@army.mil or 520-706-4531

Sincerely,

A handwritten signature in cursive script, appearing to read "Steven R. Shappell".

STEVEN R. SHAPPELL
Chief, Management Support Office



From:
Subject: [EXTERNAL] FOIA request assistance
Date: Jul 14, 2025 at 14:40:52
To: National.FOIAPortal National.FOIAPortal@usdoj.gov

That's the point. I have been and they give me no response per the emails. You guys need to police each other. No one else is and then people get screwed cause no one is held to their duties. Please assist with contacting the proper supervisors to communicate either resolving issues. Please and thank you.

Sent from my iPhone

On Jul 14, 2025, at 14:38, National.FOIAPortal (OIP)
<National.FOIAPortal@usdoj.gov> wrote:

Hello,

Thank you for your email. [FOIA.gov](https://www.foia.gov), the National FOIA Portal, is a request relay system and not a records repository, and each agency is responsible for processing its own records after a request submission is successfully relayed to it. Please know that the FOIA statute permits requesters to request an estimated date of completion from the agency processing their request. We recommend you reach out to the FOIA Office(s) or FOIA Public Liaison(s) for the agencies to which you submitted your FOIA request and specifically ask them for an estimated date of completion. Contact information for each public liaison is on the individual agency's [FOIA.gov](https://www.foia.gov) page. An index for agency search is located here: <https://www.foia.gov/agency-search.html>.

Sincerely,
National FOIA Portal Team

-----Original Message-----

From: [REDACTED]
Sent: Saturday, July 12, 2025 11:16 AM
To: National.FOIAPortal (OIP) <National.FOIAPortal@usdoj.gov>
Subject: [EXTERNAL] FOIA request assistance

Been trying to get an answer as to when my completed foia request will be sent to me by Olga Pete or her staff. Who holds employees accountable if OGIS is just good for emails?

Without having to make them via court order?

V/ [REDACTED]

Sent from my iPhone

From:
Subject: Re: [REDACTED] st - [UNCLASSIFIED]
Date: Jun 13, 2025 at 09:46
To: Pete Olga Lydia CIV USARMY HQDA DCS G-1 olga.l.pete.civ@army.mil
Cc: usarmy.pentagon.hqda-dcs-g-1.mbx.foia@army.mil

Huh? I'm just asking for a time frame. If you're the supervisor then you're more unprofessional than I thought. That would be a false flag and harassment by abuse of positional "authority". I'm just asking for a time frame and you can't even bring yourself to do that?

I'm just trying to get my situation resolved and you're making it difficult by prolonging the process and not even having the common decency to provide a time. I'm just asking you to treat me with the same respect you're demanding.

Sent from my iPhone

On Jun 13, 2025, at 09:46, Pete, Olga Lydia (Lydia) CIV USARMY HQDA DCS G-1 (USA) <olga.l.pete.civ@army.mil> wrote:

UNCLASSIFIED

Ma'am,

I am not her colleague; I am the Supervisor.

Please refrain from sending these emails. If this behavior continues, I will have no choice but to escalate the matter to the PFPA Threat Assessment Team and CID.

v/r

Ms. Lydia Pete

Deputy Chief, Management Support Division

HQDA DCS, G-1/ASA(M&RA)

Email and MS Teams: olga.l.pete.civ@army.mil

Phone: [\(703\) 695-5502](tel:(703)695-5502)



Use of digital logo does not imply Army or DoD endorsement of any Non-Federal Entity

UNCLASSIFIED

From: [REDACTED]
Sent: Friday, June 13, 2025 10:32 AM
To: Williams, Olufunmilayo L (Fumi) CIV (USA) <olufunmilayo.l.williams.civ@army.mil>
Cc: Pete, Olga Lydia (Lydia) CIV USARMY HQDA DCS G-1 (USA) <olga.l.pete.civ@army.mil>; USARMY Pentagon HQDA DCS G-1 Mailbox FOIA <usarmy.pentagon.hqda-dcs-g-1.mbx.foia@army.mil>; DOJ.OIP.FOIA@usdoj.gov; National.FOIAPortal <National.FOIAPortal@usdoj.gov>; foiarequests@dodig.mil
Subject: Re: [REDACTED] FOIA Request - [UNCLASSIFIED]

Please give me your coworkers bosses name and number.

Sent from my iPhone

On Jun 13, 2025, at 09:28, Williams, Olufunmilayo L (Fumi) CIV (USA) <olufunmilayo.l.williams.civ@army.mil> wrote:

UNCLASSIFIED

Please remove me from this thread.

Kindly,

Fumi Williams
Procurement Analyst
Headquarters, United States Department of the Army
Deputy Chief of Staff, G-1 Management Support Office
300 Army Pentagon, Room# 2C453
Washington, D.C. 20310-0300

UNCLASSIFIED

From: [REDACTED]
Sent: Friday, June 13, 2025 10:03 AM
To: Pete, Olga Lydia (Lydia) CIV USARMY HQDA DCS G-1 (USA) <olga.l.pete.civ@army.mil>
Cc: USARMY Pentagon HQDA DCS G-1 Mailbox FOIA <usarmy.pentagon.hqda-dcs-g-1.mbx.foia@army.mil>; Williams, Olufunmilayo L (Fumi) CIV (USA) <olufunmilayo.l.williams.civ@army.mil>; DOJ.OIP.FOIA@usdoj.gov; National.FOIAPortal@usdoj.gov; foiarequests@dodig.mil
Subject: Re: Rq [REDACTED] FOIA Request - [UNCLASSIFIED]

So a thirty day clock starts over with you then? According to Williams.?

What's demeaning is lack of response or consideration to the fact that my foia request is already over a year!

If you can't respond accordingly with a time frame then I want your bosses number and name.

Sent from my iPhone

On Jun 13, 2025, at 09:00, Pete, Olga Lydia (Lydia) CIV USARMY HQDA DCS G-1 (USA) <olga.l.pete.civ@army.mil> wrote:

UNCLASSIFIED

Ma'am,

I have provided the necessary response regarding your FOIA request.

Please refrain from sending daily emails that are harassing or demeaning. Such communication does not alleviate the workload or address the staff shortages our office is currently experiencing.

As a reminder, FOIA requests are handled in the order they are received, and there are several requests ahead of yours.

Additionally, the G-1 office is not responsible for actions taken by other agencies or the timeliness of their responses prior to our receipt of the request.

v/r

Ms. Lydia Pete

Deputy Chief, Management Support Division

HQDA DCS, G-1/ASA(M&RA)

Email and MS Teams: olga.l.pete.civ@army.mil

Phone: [\(703\) 695-5502](tel:(703)695-5502)

<image001.png>

UNCLASSIFIED

From: [REDACTED] <[REDACTED]@[REDACTED].com>

Sent: Friday, June 13, 2025 9:45 AM

To: Pete, Olga Lydia (Lydia) CIV USARMY HQDA DCS G-1 (USA) <olga.l.pete.civ@army.mil>

Cc: USARMY Pentagon HQDA DCS G-1 Mailbox FOIA <usarmy.pentagon.hqda-dcs-g-1.mbx.foia@army.mil>; Williams, Olufunmilayo L (Fumi) CIV (USA)

<olufunmilayo.l.williams.civ@army.mil>; DOJ.OIP.FOIA@usdoj.gov; National.FOIAPortal <National.FOIAPortal@usdoj.gov>; foiarequests@dodig.mil

Subject: Re: [REDACTED] FOIA Request - [UNCLASSIFIED]

Good day,
Olga,

Another week I've had to wait with no word.... One office after another. Please stop being rude and be considerate of what I've had to endure.

It's just a forward of an email. If it's not please explain the process so I can be considerate of you. From what I assume, you just need to forward it now that it's been redacted and paid for. Again if there's more steps please let me know. I've waited over a year already.

I'm sure you have a lot to do especially with being out after a week. I'm just asking for an estimated time I can expect my voice recording. You can't even have the common decency for a professional response with an estimated time. You should have a tracker or something to help figure it out.

Again idk how you guys run your office. Please just give me what I've paid for as it is necessary for my discharge upgrade defense support.

If not I'd appreciate your supervisors name and number.

PVT/Mrs. [REDACTED]

Sent from my iPhone

On Jun 11, 2025, at 12:07, [REDACTED].com> wrote:

Can you tell me how many are ahead of me and if they are also having the same wait time issues?

I understand your workplace staffing issues however not being able to even provide a timeframe is unacceptable for your office and position. Especially when my request has already been delayed for over a year. No reason or expected time is not okay. Sorry I'm not higher ranking or important but being told to basically sit down and wait until you get to it is highly unprofessional. Aren't you at the pentagon?

Sent from my iPhone

On Jun 11, 2025, at 12:01, Pete, Olga Lydia (Lydia) CIV USARMY HQDA DCS G-1 (USA) <olga.l.pete.civ@army.mil> wrote:

UNCLASSIFIED

Ma'am,

I cannot provide you with an estimate.

v/r

Ms. Lydia Pete

Deputy Chief, Management Support Division

HQDA DCS, G-1/ASA(M&RA)

Email and MS Teams: olga.l.pete.civ@army.mil

Phone: [\(703\) 695-5502](tel:(703)695-5502)

<image001.png>

UNCLASSIFIED

[REDACTED]
Sent: Wednesday, June 11, 2025 12:39 PM
To: Pete, Olga Lydia (Lydia) CIV USARMY HQDA DCS G-1 (USA)
<olga.l.pete.civ@army.mil>
Cc: USARMY Pentagon HQDA DCS G-1 Mailbox FOIA <usarmy.pentagon.hqda-dcs-g-1.mbx.foia@army.mil>
Subject: Re: [REDACTED] FOIA Request

You don't often get email from [REDACTED].com. [Learn why this is important](#)
I understand the processing time is generally thirty days..... so how much longer do I have to keep waiting?

Sent from my iPhone

On Jun 10, 2025, at 07:08, [REDACTED]@icloud.com> wrote:

I understand processes. Mine has been delayed for whatever reasons for over a year. I would likely not have been screwed and negatively discharged had I gotten it when i originally requested it last year. I'd appreciate a little understanding and a lot more sense urgency as would everyone else waiting, I'm sure.

I understand you were out of the office all last week and you don't have an alternate for your role. I've been there. Worn multiple hats as lower enlisted and done work outside of my pay scale during high op tempos. I get being busy. I get admin work.

I'm following up as I have to due to lack of process and to do my due diligence in

order to ensure my request doesn't get forgotten or post in the process again.

I'm an e1 now with a forth baby on the way. I had to pay 2.2k for this and would appreciate it if I could get this knocked out in a more timely manner.

Forgive any missed typos.

Sent from my iPhone

On Jun 10, 2025, at 07:01, Pete, Olga Lydia (Lydia) CIV USARMY HQDA DCS G-1 (USA) <olga.l.pete.civ@army.mil> wrote:

Good morning.

I am processing FOIA requests in the order received. Your patience is appreciated, as staffing shortages have impacted the timeliness of all personnel-related actions, including FOIA requests.

Lydia

v/r

Ms. Lydia Pete

Deputy Chief, Management Support Division

HQDA DCS, G-1/ASA(M&RA)

Email and MS Teams: olga.l.pete.civ@army.mil

Phone: (703) 695-5502

<image001.png>

From: [REDACTED] >
Sent: Monday, June 9, 2025 2:55 PM
To: Pete, Olga Lydia (Lydia) CIV USARMY HQDA DCS G-1 (USA)
<olga.l.pete.civ@army.mil>; USARMY Pentagon HQDA DCS G-1 Mailbox FOIA
<usarmy.pentagon.hqda-dcs-g-1.mbx.foia@army.mil>
Subject: [REDACTED] FOIA Request

[You don't often get email from [REDACTED]. Learn why this is important at <https://aka.ms/LearnAboutSenderIdentification>]

Good day,

I'm requesting the digital recording per the attached. Thanks.

[REDACTED]

From:
Subject: Re: FOIA voice recording Request
Date: Jun 4, 2025 at 10:48:16
To: Olufunmilayo L CIV Williams olufunmilayo.l.williams.civ@army.mil

I'm not sure what you mean by your question. Hopefully she's able to logon and fulfill my foia request while she's out of the office. She said she would intermittently.

Thank you for your assistance.

Sent from my iPhone

On Jun 4, 2025, at 10:46, Williams, Olufunmilayo L (Fumi) CIV (USA) <olufunmilayo.l.williams.civ@army.mil> wrote:

No Mario won't be able to assist. He's just available to assist with internal personnel questions while she's away. Lydia is the only FOIA POC for G-1. Were you under G-1 or M&RA when you were with us?

Kindly,

Fumi Williams
Procurement Analyst
Headquarters, United States Department of the Army
Deputy Chief of Staff, G-1 Management Support Office
300 Army Pentagon, Room# 2C453
Washington, D.C. 20310-0300

From: [REDACTED]
Sent: Wednesday, June 4, 2025 11:35 AM
To: Williams, Olufunmilayo L (Fumi) CIV (USA) <olufunmilayo.l.williams.civ@army.mil>
Subject: Re: FOIA voice recording Request

Hello again,

Is Mario available to help? She listed him for urgent assistance...

Sent from my iPhone

On Jun 4, 2025, at 10:26, Williams, Olufunmilayo L (Fumi) CIV (USA)
<olufunmilayo.l.williams.civ@army.mil> wrote:

█ please email Lydia (you emailed me in error). Please remove me from the email thread. I don't want to be privy to confidential information.

Kindly,

Fumi Williams
Procurement Analyst
Headquarters, United States Department of the Army
Deputy Chief of Staff, G-1 Management Support Office
300 Army Pentagon, Room# 2C453
Washington, D.C. 20310-0300

█ █@icloud.com

Sent: Wednesday, June 4, 2025 11:24 AM

To: Williams, Olufunmilayo L (Fumi) CIV (USA) <olufunmilayo.l.williams.civ@army.mil>

Subject: Re: FOIA voice recording Request

Good day,

I understand you're out of the office until Monday, please see attached for my foia request (voice recording). I've already paid the \$2.2k for it. My request was submitted over a year ago to USARC FOIA. Thank you.

PVT █ Mrs. █
626-423-7674

Sent from my iPhone

On Jun 4, 2025, at 10:18, Williams, Olufunmilayo L (Fumi) CIV (USA) <olufunmilayo.l.williams.civ@army.mil> wrote:

Kindly,

Fumi Williams
Procurement Analyst
Headquarters, United States Department of the Army
Deputy Chief of Staff, G-1 Management Support Office
300 Army Pentagon, Room# 2C453
Washington, D.C. 20310-0300

From: Williams, Olufunmilayo L (Fumi) CIV (USA)
Sent: Wednesday, June 4, 2025 11:17 AM
To: Pete, Olga Lydia (Lydia) CIV USARMY HQDA DCS G-1 (USA) <olga.l.pete.civ@army.mil>
Subject: RE: FOIA Requist

Hi Lydia,

██████████ used to be a Sergeant in the Army and would like to speak with you regarding her FOIA request. ██████████ per is ██████████ and her email is ██████████. She tried to call you, but she couldn't leave a message. She also sent a message through the general email box for FOIA.

Kindly,

Fumi Williams
Procurement Analyst

Headquarters, United States Department of the Army
Deputy Chief of Staff, G-1 Management Support Office
300 Army Pentagon, Room# 2C453
Washington, D.C. 20310-0300



DEPARTMENT OF THE ARMY
UNITED STATES ARMY TRIAL DEFENSE SERVICE
FORT LEONARD WOOD FIELD OFFICE
13001 WEST 16TH STREET, BLDG 832
FORT LEONARD WOOD, MISSOURI 65473



REPLY TO
ATTENTION OF:

ATZT-TDS

25 April 2024

MEMORANDUM FOR Commander, Army Reserve Medical Command, 2801 Grand Avenue, Pinellas Park, FL 33782-6140

THRU Office of the Staff Judge Advocate, Army Reserve Medical Command, 2801 Grand Avenue, Pinellas Park, FL 33782-6140

SUBJECT: Respondent's Request for Audio Recording of Board Proceedings and Report of the Board, [REDACTED]

1. On 4-5 April 2024, a Board convened to determine whether SGT [REDACTED] should be separated from the U.S. Army. The Board proceedings were recorded on a recording device managed by the Reporter and the Board President.
2. At the conclusion of the Board proceedings, the undersigned respondent's counsel requested a copy of the Board audio and the Report of the Board. Respondent's counsel additionally sent an email to the Recorder for the Board requesting a copy of both files.
3. This is a written request for the complete Board audio to assist in preparing an appeal. Providing the requested audio would allow the Respondent or her counsel to pin-point time hacks in the audio from the two-day board. This would allow the approval authority to hear the words, the objections, and the responses for himself rather than either counsel's summarization of what happened in the Board.
4. This is also a written request for the Report of Proceedings from SGT [REDACTED] Board. Respondent's counsel made several objections, both to the legal advisor for bias and to the introduction of several parts of testimony. See AR 15-6, para. 3-14f.
5. Point of contact for this memorandum is the undersigned at charles.e.turner292.mil@mail.mil or at 573-528-2907.

A handwritten signature in cursive script that reads "Charles E. J. Turner".

CHARLES E. TURNER
CPT, JA
Defense Counsel



FRMF-CG

29 April 2024

MEMORANDUM FOR RECORD

SUBJECT: Decision on Respondent's Request for Audio Recording of Board Proceedings and Report of the Board – SC [REDACTED]

1. I have thoroughly reviewed the request for audio recording of the board proceedings and report of the board held on 4 through 5 April 2024 submitted by S [REDACTED] through her Trial Defense Service counsel on 25 April 2024.
2. Upon the advice and counsel from the Army Reserve Medical Command (AR MEDCOM) Office of the Staff Judge Advocate (OSJA), SG [REDACTED] request for the audio recording prior to submission of her matters for my consideration is denied. In accordance with Army Regulation (AR) 15-6, *Procedures for Administrative Investigations and Boards of Officers*, and AR 635-200, *Active Duty Enlisted Administrative Separations*, a summarized transcript will accompany the report of proceedings provided to SG [REDACTED] as required.
3. I direct the AR MEDCOM OSJA preserve the audio recording in the event it is required for any appeal by SG [REDACTED] on the final action in this matter. I further direct this memorandum be made part of the report of proceedings in this case.
4. The point of contact for this action is LTC Jason A. Baval, Deputy Staff Judge Advocate, AR MEDCOM at jason.a.baval.mil@army.mil or (910) 771-5011.

YOST.MICHAEL.L
YNN.1146981816

Digitally signed by
YOST.MICHAEL.LYNN.1146981
816
Date: 2024.04.29 12:22:49
-05'00'

MICHAEL L. YOST
Brigadier General, USAR
Commanding

Freedom of Information Act Office



Greetings:

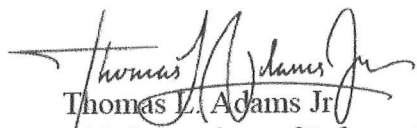
This letter is in response to your Freedom of Information Act (FOIA) request seeking "two voice recordings from my board hearing records". Your request was received by U.S. Army Reserve Command and processed in accordance with AR 25-22, The Army Privacy Program and AR 25-55, The [REDACTED]

The responsive records contain documents that fall under the release authority of the Deputy Chief of Staff, G1 (DCS, G1). We do not have the release authority for the records thus, we are referring your request and responsive records to the DCS, G1, which may be contacted at:

Deputy Chief of Staff, G1
ATTN: DAPE-ZXM
300 Army Pentagon
Room 1D374
Washington, DC 20310-0300
Phone: (703) 695-7783 Fax: (703) 695-6156
POC: Olga Pete
usarmy.pentagon.hqda-dcs-g-1.mbx.foia@army.mil

If you have any questions or concerns, you may contact Kimberly A. Pettaway at (910) 570-8162 or usarmy.usarc.usarc-hq.mbx.foia@army.mil.

Sincerely,


Thomas L. Adams Jr.
Chief, Freedom of Information
Privacy Act Office

0058C-AHC-Leavenworth

550 Pope Avenue

Building 343

Fort Leavenworth, KS 66027-

Patient Name: [REDACTED]

Date of Service: 11/25/2024

FIN: 133 [REDACTED]

33 years Female

Office and Clinic Notes

Document Type:	Mental Health Outpt Note
Service Date/Time:	11/25/2024 09:59 CST
Result Status:	Auth (Verified)
Perform Information:	ARMISTEAD-JEHLE,PATRICK J (11/25/2024 15:28 CST)
Sign Information:	ARMISTEAD-JEHLE,PATRICK J (11/25/2024 15:28 CST)

Behavioral Health

SM referred for CDBHE with 707 outlining "paranoid behavior" in the context of pending separation. Command intent with 707 was discerned to be related to safety check and recommendations for care. SM presented in a fair degree of distress marked by anxiety and depression. SM noted work related stress secondary to her pending UCMJ separation for falsifying documentation and insubordination. SM presented with suspiciousness and some degree of paranoia. She recounted a "toxic" work environment, marked by efforts to dishonorably discharge her. The SM did not voice all details of her circumstances. but alluded to the idea that this centers on covid vaccinations. SM wishing to separate from military but is disputing the conditions of the separation. She is reportedly seeking an audience with the CG to present information that she believes will exonerate her. However, she apparently feels that this will expose wrong doing among the some former and current leadership in her unit and as such is being blocked from this meeting. She stated that she requested the recordings of her separation board, but these were not provided. She indicated that her FOIA requests have not been addressed. She was assigned counsel via SJA, but this individual reportedly PCSed and she has not been assigned new representation. SM endorses notable psychological distress related to this process. She denied hallucinations. He endorsed poor sleep, amassing about 5 hours per night. The SM endorsed loss of appetite and unintended weight loss. She reported the onset of anxiety and depression with her initial mandate to be vaccinated. This was exacerbated earlier this year. Functionally, the SM denied being given any work details in her AGR position since about May. She stated that she checks in for accountability daily, but is otherwise given no duties.

Medications

No active medications

Allergies

No Known Allergies

Family History

No family history documented

High Interest

High Interest: No

High Interest date: 05/17/23

Special Duty

Special Duty Status

Arming Status/Weapons Qualification: No (01/29/24)

Aviation (Flight): No (01/29/24)

Dive: No (01/29/24)

Ionizing Radiation Worker: No (01/29/24)

Jump: No (01/29/24)

Landing Craft Air Cushion: No (01/29/24)

Nuclear Field Duty: No (01/29/24)

Personnel Reliability Program: No (01/29/24)

Patient Name: [REDACTED]

33 years

Female

Office and Clinic Notes

Presidential Support Duty: No (01/29/24)
Special Operations/Warfare: No (01/29/24)
Submarine: No (01/29/24)

BHDP Data
BHDP Data:

Measurement Results

Measure	Baseline/ First Score	Previ ous Score	Most Recent Score	Most Recent Score Interpretation	Most Recent Date
ACE Adverse Childhood Events					
AUDIT-C Alcohol Use Disorders Screening	0	0	0	AUDIT-C Score 0 reflects no alcohol use reported, no additional counseling or interventions needed	25Nov20 24
BAM Risk/Protection/Use (subscales) Addiction Symptoms					
BAM Follow-up Addiction Symptoms					
BASIS-24 Emotional Lability Subscale General Distress	2.5	2.28	3	High Level of Distress	25Nov20 24
BASIS-24 Psychosis Subscale General Distress	0.89	2.79	1.52	Low to Moderate Level of Distress	25Nov20 24
BASIS-24 Relationships Subscale General Distress	1.2	2.37	1	Subclinical to Low Level of Distress	25Nov20 24
Brief Coping Adaptive/Maladaptive (subscales) Coping					
C-SSRS-S Lifetime Screening Suicide Risk	Amber			Lifetime (ideation, method, plan, intent and/or behavior) Endorsed. Provider to Follow-up.	17May20 23
C-SSRS-S Past Month Suicide Risk	Green	Red	Amber	Current Ideation and/or Lifetime Behavior Endorsed. Provider to Follow-Up.	25Nov20 24
CSI Couples Satisfaction Index	8		18	No Significant Relationship Distress Detected.	25Nov20 24
Expressions of Moral Injury Self-Directed/Other- Directed (subscales) Moral Injury					
WRAIR + Social Impairment	11/12/1	8/8/2	13/2334 /3		25Nov20 24

Patient Name:

[REDACTED]

years

Female

[REDACTED]

Office and Clinic Notes

Personal or Social/Occupational/Leisure (subscales) Functional Impairment					
GAD7 Anxiety Screener	16	12	21	Severe Anxiety Symptoms Reported. Evaluation Indicated.	25Nov2024
HRQL Quality of Life					
ISI Insomnia Symptoms	20	19	17	Clinical Insomnia - Moderate Severity.	25Nov2024
K6 General Distress	18	13	22	Serious Mental Distress.	25Nov2024
Pain Physical Pain Rating	6	4	7		25Nov2024
PCL-5 PTSD Symptoms	44	56	71	Significant PTSD Symptoms Reported. Evaluation Indicated.	25Nov2024
PHQ9 Depression Symptoms	19	21	24	Severe Depressive Symptoms Reported. Evaluation Indicated.	25Nov2024
RSES-4 Resilience					
SADD Alcohol Dependency					
TBI Screen Traumatic Brain Injury	Positive	Positive	Positive	Positive on TBI Screen.	25Nov2024
Therapeutic Alliance Patient/Provider Relationship	-3		-3	This section was started but patient reports not being seen in this clinic previously - no score.	25Nov2024

Informed Consent

The SM had concerns about select wording in the written informed consent. In an effort to establish rapport the SM the reason for the evaluation and limites of confidentiality were reviewed orally and agreed to by the SM

Objective

MSE

MENTAL STATUS EXAM:

Appearance: adequately groomed and dressed in ACUs

Behavior/Orientation: Alert and fully oriented

Abnormal Movements: SM anxious as evidenced by consistent foot tapping

Rapport: Fair

Speech: WNL

Affect: full range. Tearful at times, could however laugh appropriately

Thought Process: Largely linear. Indications of some paranoid thought processes, but with questioning SM had insight into these.

Thought Content: somewhat perseverative, but could be directed.

Judgment: Intact

Insight: Seemingly Intact

Impulsivity: None Noted

Cognition: Grossly intact

Fund of Knowledge: intact

Patient Name:

33 years

Female

Office and Clinic Notes

Past Psychiatric History

SM reported three efforts to establish network care in about the past year. she stated that two of the therapists "fired" her, alluding to disagreements over select health care topics. She stated that she left one secondary to limited rapport. She was reportedly prescribed Zoloft some 18 months ago, but denied taking it as she was breast feeding at the time.

Additional Treatment Comments:

Psychosocial History

SM is married since 2016 and currently described this in a positive manner. three children ages 6, 4, and 1.5 years.

Military Trauma

SM stated that when she was driving to her first duty station in 2015 she stayed at a Friend's cousin's house who was an E-7 stationed at Fort Leonard Wood. She stated that he raped her that evening, but that she never reported it. However, it does not appear that this incident is directly related to her current disciplinary issues.

Nutrition Screening

MST Amount Weight Lost: Unsure

MST Adult Lost Weight: Yes

MST Adult Poor Eating: Yes

Risk Assessment

CSSRS

Raw Score of 1 with "Wish to be dead" endorsed.

Suicide Risk Level Suicide Risk Details:

SM denied current SI. she endorsed some suicidal ideation with plan to intentionally crash vehicle in February of 2024. she however denied any history of suicidal behavior. SM endorses strong faith based believes that prohibit suicide. She also cites supportive husband, social network and three children as protective factors. At present suicide risk is considered low.

Homicide Risk Level

SM denied any current or past HI or any related behaviors.

Violence Risk Details:

Current risk is considered low.

Assessment and Treatment Plan

Formulation

SM referred for CDBHE secondary to perceived paranoia on behalf of command related to her pending UCMJ related separation. SM described a long history of work conflict and perceives that she is being targeted by her command. She was hesitant to explain all details related to her complaints. I cannot verify the veracity of her allegations against command. In my opinion, there is some degree of paranoia, however this is not generalized outside of her current work environment. To this end, there is currently insufficient evidence for a related personality disorder. The SM denied hallucinations and is not deemed to be psychotic. Criteria for GAD and MDD appear to be met, and PTSD is considered a rule out.

Diagnosis

Patient Name:

33 years

Female

Office and Clinic Notes

MDD, Provisional
GAD, Provisional
Occupational Stress
R/O PTSD

SUD Diagnostic

She denied alcohol use.

SUD Diagnostic Detailed Comments:

Prognosis

Fair

General Treatment Planning

CDBHE and as such no tx planning was engaged. The SM was however encouraged to consider engaging psychotherapy. Given her location remote from an MTF, this will likely need to take place via a network provider. Given her faith, a faith-based counselor maybe best to establish rapport. 3822 sent to command per regulation. This document outlined that she is not in need of immediate hospitalization and that while she likely meets criteria for GAD and MDD that her MRDP has not been met and that a referral to IDES is not currently indicated. Psychotherapy was recommended. If further evaluation is required psychological testing could be of utility.

Disposition

Disposition

Psychologically fit for full duty: No

Command Consultation: Yes

Issued Profile/DLC/LIMDU: No

Able to Carry and Fire a Weapon: No

BH Able to Deploy: No

Change in Special Duty: No

Change in Security Clearance: No

MEB Referral/In Progress: No

Admin Separation Referral/In Progress: Yes

Disposition Comment: SM with depression and anxiety that are related to occupational stressors. Symptoms severe enough to interfere with deployability, but treatment options have not been exhausted and she is thus not at MRDP.

Command Consultation date: 11/19/24

Electronically signed on: 11/25/2024 15:28 CST

PATRICK J ARMISTEAD-JEHLE

University Hospital
One Hospital Drive
Columbia, MO 65212-

Patient Name: [REDACTED]
MRN: [REDACTED]
Patient Type: Emergency
DOB/Sex: [REDACTED] Female
Attending: Desouza MD,Thiago Q
Referring:

Documents

DOCUMENT NAME: Electrocardiogram - Adult
RESULT STATUS: Final
RESULT DATE: 11/25/2024 19:28 CST
SIGN INFORMATION:

Electrocardiogram Adult

UHC ER BLACK 2

Pat Name: [REDACTED] Test Date: 2024-11-25
Patient ID: 20387072 Department:
Gender: Female Room:
DOB: [REDACTED] Technician:
[REDACTED] Reading MD: Martin Alpert

Measurements

Intervals
Rate: 70 Axis
PR: 146 P: -85
QRSD: 82 QRS: 71
QT: 395 T: 48
QTc: 415

Interpretive Statements

ECTOPIC ATRIAL RHYTHM
ABNORMAL RHYTHM ECG
Compared to ECG 07/23/2024 13:14:25
Ectopic atrial rhythm now present
Sinus rhythm no longer present
Sinus arrhythmia no longer present
Electronically Signed On 11-28-2024 16:29:18 CST by Martin Alpert

Electrocardiogram Adult

[https://ecg.umh.edu/webapi/webapi.php?username=viewonly&\[REDACTED\]](https://ecg.umh.edu/webapi/webapi.php?username=viewonly&[REDACTED]) URL

LEGEND: @-Abnormal, c-Corrected, C-Critical, L-Low, H-High, i-Interp Data, R-Result Comment, ^-Performing Loc

If you have any questions or concerns regarding this documentation, please call (573) 882-3170.

Report Request ID: [REDACTED]

University Hospital
One Hospital Drive
Columbia, MO 65212-

Patient Name: [REDACTED]
MRN: [REDACTED]
Patient Type: Emergency
DOB/Sex: [REDACTED] [REDACTED]
[REDACTED] MD,Thiago Q
Referring:

Radiology

Accession #	Exam Date/Time	Procedure	Ordering Provider
[REDACTED]	11/25/2024 22:36 CST	CT Head or Brain	Desouza MD,Thiago Q

Reason For Exam
(CT Head or Brain) mechanical fall

Report

PROCEDURE INFORMATION:

Exam: CT Head Without Contrast
Exam date and time: 11/25/2024 10:31 PM
Age: 33 years old
Clinical indication: Mechanical fall

TECHNIQUE:

Imaging protocol: Computed tomography of the head without contrast.

COMPARISON:

CT Spine Cervical 11/25/2024 10:31 PM

FINDINGS:

Brain: Unremarkable. No hemorrhage. Unremarkable white matter. No mass effect.
Cerebral ventricles: No ventriculomegaly.
Paranasal sinuses: Visualized sinuses are unremarkable. No fluid levels.
Mastoid air cells: Visualized mastoid air cells are well aerated.
Bones: Unremarkable. No acute fracture.
Soft tissues: Unremarkable.

IMPRESSION:

No acute intracranial abnormality.

Electronically signed by Ahmad Asif, MD at 11/25/2024 23:00
For questions regarding this report please call vRad at 866-941-5695

I have personally reviewed the images and attest to the contents of this report.

LEGEND: @-Abnormal, c-Corrected, C-Critical, L-Low, H-High, i-Interp Data, R-Result Comment, *-Performing Loc

If you have any questions or concerns regarding this documentation, please call (573) 882-3170.

University Hospital

Patient Name: [REDACTED] ANDREA NICOLLE

One Hospital Drive
Columbia, MO 65212-

MRN: MU016657115

Radiology

Report

****Final Report****

*Electronically Signed by: Lage MD, Kraig Jason
Signed on: 11/26/24 00:43*

Transcribed date/time: 11/26/24 00:44

LEGEND: @-Abnormal, c-Corrected, C-Critical, L-Low, H-High, i-Interp Data, R-Result Comment, *-Performing Loc

If you have any questions or concerns regarding this documentation, please call (573) 882-3170.

University Hospital

Patient Name: [REDACTED]
 [REDACTED]
 [REDACTED]
 [REDACTED]
 [REDACTED] Thiago Q
 Referring:

Documents

DOCUMENT NAME: Emergency Services Note
 RESULT STATUS: Modified
 RESULT DATE: 7/23/2024 11:35 CDT
 SIGN INFORMATION: Wright MD, Abbie C (7/27/2024 22:29 CDT); Wright MD, Abbie C (7/27/2024 22:28 CDT); Clemens MD, Devin E (7/23/2024 14:13 CDT)

Basic Information

Chief Complaint
 passed out at home and hit head. LMP 5-21-24

History of Present Illness

Pt is a 32 yo female with a hx of MDD and anxiety attacks/panic disorder who presents to the ED with cc of syncopal episode and head injury. Pt reports she's been under a lot of different stressors recently, was cleaning her husbands cut/injured finger out on the porch, was in an argument with him when she got a text/call she'd been waiting on, tensed up, and synopsized falling down to the group and bumping her head against the metal rail/table. She was out for approximately 10 seconds before she came to. She had a mild headache from hitting her head and took tylenol at home, also having left neck pain, upper left back pain. Denies any recent illness/sick contact, CP, SOB, abd pain, n/v, additional injuries/complaints. She attributes her episode to anxiety/stress. Also is worried about being pregnant and decided to get checked out to be on the safe side. Not on blood thinners.

Review of Systems

Constitutional: No fever. No chills.
Skin: No rashes
Eye: No visual problems
ENT: No ear pain, sore throat, or nasal congestion.
Resp: No cough. No SOA. No wheezing.
CV: No chest pain.
GI: No abdominal pain. No N/V/D.
GU: No dysuria or hematuria.
MSK: No back pain.
Neuro: No numbness/tingling
Lymph: No swollen nodes.
 All other systems reviewed and are otherwise negative. ROS reviewed as documented in chart.

Physical Exam

Vitals & Measurements
T: 36.3 °C **HR:** 57 **RR:** 18 **BP:** 125/75 **SpO2:** 100%
WT: 61.3 kg
 General: Alert, no acute distress. Answering questions in complete sentences
 Skin: Warm, dry, no rashes or ecchymotic changes noted
 Head: Normocephalic, atraumatic. No ecchymosis, palpable skull depressions,

Problem List/Past Medical History

Ongoing
 No qualifying data
Historical
 Fetal echogenic bowel
 Pregnant
 Pregnant
 Pregnant
 Pregnant

Procedure/Surgical History

- Right hip surgery (07/2022)
- Left hip arthroscopy w/ acetabuloplasty (02/28/2022)
- Dental procedure

Allergies

NKA

Social History

Smoking Status
 Never smoker

Alcohol

Past

Employment/School

Work/School description: ARMY FULL TIME. Highest education level: Some college.

Exercise

Exercise type: Walking.

Home/Environment

Lives with Children, Spouse. Alcohol abuse in household: No. Substance abuse in household: No. Smoker in household: No. Feels unsafe at home: No.

Nutrition/Health

Regular, Vitamin/Supplements: PNV. Eating disorders: NONE . Sleeping concerns: No. Alternative healthcare: NONE.

Sexual

LEGEND: @-Abnormal, c-Corrected, C-Critical, L-Low, H-High, i-Interp Data, R-Result Comment, *-Performing Loc

If you have any questions or concerns regarding this documentation, please call (573) 882-3170.

University Hospital

Patient Name: [REDACTED]

One Hospital Drive
Columbia, MO 65212-

MRN: [REDACTED]

Documents

lacerations. No post auricular bruising/swelling.
 Neck: Supple. Trachea midline. No midline c-spine tenderness or stepoffs. L paraspinous tenderness
 Eye: PEERL, normal conjunctiva. EOM intact b/l
 Ears, nose, mouth, and throat: Oral mucosa moist, no pharyngeal erythema or exudate. Uvula midline without obvious deviations
 Cardiovascular: bradycardic rate, regular rhythm, no murmur, normal peripheral perfusion, no edema
 Respiratory: Lungs CTA b/l, respirations are non-labored, breath sounds are equal.
 Chest wall: Symmetric chest rise. No tenderness or deformity
 Back: No midline tenderness. No stepoff deformities noted along spine. L paraspinous tenderness to t spine
 Musculoskeletal: Normal ROM and strength throughout, no swelling
 Gastrointestinal: Soft, nondistended, nontender
 Neurological: A&Ox4. No gross deficits. Normal speech. Normal grip strength, normal finger to nose
 Psychiatric: Cooperative, labile

Sexually active: Yes.
Substance Abuse - Denies Substance Abuse
Tobacco - Denies Tobacco Use

Family History
 Negative genetic finding: Mother and Father.

Lab Results

HEMATOLOG Y PROFILES	LATEST RESULTS	HISTORICAL RESULTS
WBC	07/23/ 8.15 24 12 00	07/ 17.18 High 30 23
RBC	07/23/ 4.94 24 12 00	07/ 3.68 Low 30 23
HGB	07/23/ 14.2 24 12 00	07/ 11.0 Low 30 23
HCT	07/23/ 44.1 24 12 00	07/ 32.1 Low 30 23
MCV	07/23/ 89.3 24 12 00	07/ 87.2 30 23
MCH	07/23/ 28.7 24 12 00	07/ 29.9 30 23
MCHC	07/23/ 32.2 24 12 00	07/ 34.3 30 23
RDW SD	07/23/ 42.7 24 12 00	07/ 43.3 30 23
RDW CV	07/23/ 13.0 24 12 00	07/ 13.6 30 23
PLT	07/23/ 221 24 12 00	07/ 146 Low 30 23
MPV	07/23/ 10.2 24 12 00	07/ 11.4 30 23
% Neutrophils	07/23/ 72.8 24 12 00	07/ 87.1 30 23
Absolute Granulocytes	07/23/ 5.94 24 12 00	07/ 14.98 High 30 23
% Immature Granulocytes	07/23/ .40 24 12 00	07/ .70 High 30 23
Abs Immature Granulocytes	07/23/ 0.03 24 12 00	07/ 0.12 High 30 23

Medical Decision Making

Pt is a 32 yo female with MDD, anxiety with panic attacks who presents to the ED following a syncopal episode for evaluation. Pt says that she has been very anxious, was cleaning out her husband cut finger when she got a text/call she's been waiting for breathed/passed out. She attributes her syncopal episode to her anxiety. Was unconscious for <20 seconds, ambulatory since.

On exam, pt with baseline sinus bradycardia. Vitals otherwise stable.
 No obvious head trauma, midline tenderness. Exclusively left paraspinal tenderness. FROM on exam.

Consider: syncope due to arrhythmia, electrolyte abnormality, pregnancy, UTI, closed head injury, concussion
 Plan: CBC CMP UA urine pregnancy and EKG obtained

Canadian Head CT and Nexus C-spine negative- imaging is not clinically warranted.
 Pt was offered IVF, tylenol, muscle relaxers but declined.
 She said if she didn't need anything else she wanted to go home.

Discussed concussion, taking care at home.
 Pt and husband verbalized understanding and wished to leave.

I independently reviewed and interpreted this patient's EKG.
 EKG Date/Time: 7/23/24
 EKG interpretation: sinus bradycardia, rate 56. normal axis, intervals. No delta waves, no ST/t wave changes, no STEMI.

I independently reviewed and interpreted the following labs:
 CBC: no anemia, leukocytosis
 CMP: normal, no derangements
 Urine: negative pregnancy, no infection

LEGEND: @-Abnormal, c-Corrected, C-Critical, L-Low, H-High, i-Interp Data, R-Result Comment, ^-Performing Loc

If you have any questions [REDACTED]

University Hospital
 One Hospital Drive
 Columbia, MO 65212-

Patient Name: [REDACTED]
 [REDACTED]

Documents

Assessment/Plan

1. Head contusion
2. Syncope
3. Neck strain

Patient Education

Head Injury
 Cervical Strain

Follow Up

With	When	Contact Information
Morris MD, Laquita Sherrelle, FAMILY MEDICAL CARE, Family Practice	Within 1 to 2 weeks	
Additional Instructions:		
Return to Emergency Department	Within As Needed	
Additional Instructions:		

Medication Reconciliation

Discontinued

docusate (docusate sodium 100 mg oral capsule) 1 Capsules Oral Twice daily.
 Refills: 0.

% Lymphocytes	07/23/24 12:00	18.4	07/23/24 12:00	7.0
Abs Lymphocytes	07/23/24 12:00	1.50	07/23/24 12:00	1.20
% Monocytes	07/23/24 12:00	7.0	07/23/24 12:00	4.9
Abs Monocytes	07/23/24 12:00	0.57	07/23/24 12:00	0.84
% Eosinophils	07/23/24 12:00	1.0	07/23/24 12:00	0.1
Abs Eosinophils	07/23/24 12:00	0.08	07/23/24 12:00	0.01 Low
% Basophils	07/23/24 12:00	0.4	07/23/24 12:00	0.2
Abs Basophils	07/23/24 12:00	0.03	07/23/24 12:00	0.03
% Nucleated RBCs	07/23/24 12:00	0.0	07/23/24 12:00	0.0
Absolute Nucleated RBCs	07/23/24 12:00	0.0	07/23/24 12:00	0.0

GENERAL CHEMISTRY	LATEST RESULTS
Sodium	07/23/24 12:00 140
Potassium	07/23/24 12:00 4.4
Chloride	07/23/24 12:00 107
CO2	07/23/24 12:00 28
Anion gap	07/23/24 12:00 9
Glucose Lvl	07/23/24 12:00 91
BUN	07/23/24 12:00 13
Creatinine, standardized	07/23/24 12:00 0.6
Estimated GFR for Adults	07/23/24 12:00 122
Estimated GFR for peds	07/23/24 12:00 Not calculated

LEGEND: @-Abnormal, c-Corrected, C-Critical, L-Low, H-High, i-Interp Data, R-Result Comment, *-Performing Loc

If you have any questions or concerns regarding this documentation, please call (573) 882-3170.

Report Request ID: [REDACTED]

University Hospital

Patient Name: [REDACTED]

One Hospital Drive
Columbia, MO 65212-

Documents

Calcium	07/23/24 12:00	9.0
Total Protein	07/23/24 12:00	7.6
Albumin	07/23/24 12:00	4.1
T Bili	07/23/24 12:00	0.48
Alkaline Phosphatase	07/23/24 12:00	61
AST-SGOT	07/23/24 12:00	25
ALT-SGPT	07/23/24 12:00	18

URINALYSIS	LATEST RESULTS	
COLOR	07/23/24 12:00	Yellow
CLARITY	07/23/24 12:00	Clear
SPECIFIC GRAVITY	07/23/24 12:00	1.025
UA PH	07/23/24 12:00	5
UA GLUCOSE	07/23/24 12:00	Negative
UA KETONES	07/23/24 12:00	Negative
BILIRUBIN	07/23/24 12:00	Negative
UA UROBILINOGEN	07/23/24 12:00	Negative
UA BLOOD	07/23/24 12:00	Negative
UA LEUKOCYTES	07/23/24 12:00	Negative
UA NITRITE	07/23/24 12:00	Negative
UA PROTEIN	07/23/24 12:00	Negative
Urine Collection Method	07/23/24 12:00	Clean Catch UR

SENSITIVE OTHER URINE TESTS	LATEST RESULTS	
Pregnancy Test Result:	07/23/24 12:00	Negative

LEGEND: @-Abnormal, c-Corrected, C-Critical, L-Low, H-High, i-Interp Data, R-Result Comment, *-Performing Loc

If you have any questions or concerns regarding this documentation, please call (573) 882-3170.

Report Request ID: [REDACTED]

University Hospital

Patient Name: [REDACTED]

One Hospital Drive
Columbia, MO 65212-

Documents

Addendum by Wright MD, Abbie C on July 27, 2024 22:28:59 CDT

Attestation by Wright MD, Abbie C on July 27, 2024 22:29

I personally saw and evaluated the patient. I discussed the management with the resident and reviewed the resident's note. I agree with the documented findings and plan of care.

Procedures:

-

Critical Care:

-

LEGEND: @-Abnormal, c-Corrected, C-Critical, L-Low, H-High, i-Interp Data, R-Result Comment, ^-Performing Loc

If you have any questions or concerns regarding this documentation, please call (573) 882-3170.

Report Request [REDACTED]

Page 5 of 5

Print Date/Time: 3/24/2025 16:09 CDT



To whom it may concern:

Date: 02/13/2024

Time: 9:35-10:25 AM

Treatment type: Individual psychotherapy

Service Setting: United Physicians: South Providence Adult Psychiatry Clinic

Rowlette, Andrea Nicolle

Identifying Information:

Andrea Nicolle is a 32 y/o Caucasian female. She is a wife and a mother of three children who are 5,3, and a six-month-old daughter. She currently lives with her husband and children in Moberly, MO.

Assessment:

Diagnoses (DSM- 5 TR)

Major Depressive Disorder, recurrent, moderate.

Generalized Anxiety Disorder with panic attacks.

R/O Posttraumatic Stress Disorder

Medications:

None reported. She was prescribed Zoloft for depression but is not taking it because she prefers to avoid any medications that could interfere with breastfeeding until her child turns one. She will try medication in the future as recommended by her doctor.

Andrea first came to our clinic to establish care with psychiatry on 06-20-23. She saw Dr. Chuang for perinatal care and was referred to therapy. Her initial intake was with Dr. Gupta on 07-19-2023. She was transferred to this provider after Dr. Gupta left the clinic. We met today for the continuation of care.

reported that her symptoms of anxiety and depression worsen. She mentioned that the last three years have been difficult for her due to stress related to workplace harassment. She reported difficulties with previous supervisors who mistreated her and made false accusations about her. Her current symptoms include reduced appetite and significant weight loss (more than fifty pounds) due to stress. Difficulties with initiation and interrupted sleep. She stated that it takes between 2-3 hours for her to fall asleep because her mind is constantly racing with worries. She stated constant worry and difficulties controlling her concerns. She plays conversations she had, constantly doubts what she said, and wishes she could have said something different. She mentioned that her continued stress had impacted her milk production, which is affecting her infant daughter. She spoke extensively about the long-term benefits of breast milk. She seemed well-informed, and her arguments for preferring breast milk over formula are well-documented.

One of her most significant stressors has been returning to work in person. She mentioned that her first day back was difficult because she could not focus and concentrate. Before she went to work, her anxiety and worry was debilitating. She said that the workplace triggers traumatic memories that she can't control. She filed paperwork stating her desire to separate from the Army in 2021, but the investigation has drawn out for three years, and that has increased her anxiety. She was told that her case would be reviewed in November 2023, but it was rescheduled for April 2024.

██████████ reported that she has continued to stay busy with her family and studies. She is a full-time sophomore at Stephen College in their Equine Program, taking 12 credits.

Mental Health Status

██████████ came on time for her appointment today. She was fully oriented and alert in all spheres. She presented at her stated age, with an average build. She was dressed comfortably and appropriately for the weather. Her six-month-old baby accompanied her in her car seat. She has black hair that she wore in a ponytail. She presents with good grooming and hygiene. She cooperated and elaborated on answers without prompting. She made good eye contact and used appropriate social skills. Her physical movements were within normal limits. She presented a dysphoric mood and congruent anxious affect. She cried for most of the session while she spoke about her depression and anxiety. Her speech was normal in rate, rhythm, and tone. She was engaged, talkative, and cooperative during the session. Her thought content was within normal limits and assessed by the command of her oral language. Her memory, abstraction, and fund of knowledge all appeared within normal limits. Her concentration and attention within the session occurred within normal limits. She denied a history of traumatic brain injury, seizure, stroke, or memory problems. Her judgment and insight appeared normal. She denied a history of or current suicidal ideation, plan, intent, or attempts to take her life. She also denied a history of or current homicidal ideation, plan, intent, or attempts. She denied Visual, Auditory, Tactile, or Olfactory hallucinations or delusions. She denied self-injurious behaviors.

Protective Factors: Her children

Other factors affecting the patient.

Ongoing Harassment Investigation.

Reschedule the meeting to review her request for separation from the Army.

Uncertainty about not knowing when her current distressing situation would change.

Patient's Goals

Reduction of mental health symptoms

To return to her a place of emotional stability.

To focus on her goals.

To be able to focus on her family without constantly worrying.

Treatment Plan: To continue participating in outpatient therapy every other week.

Prognosis and Recommendations.

Without any intervention and changes, Andrea's prognosis for recovery is poor.
(Poor indicates the client's condition is unlikely to improve, and her quality of life will be significantly impacted.)

With the right treatment plan and environmental and external changes, her prognosis is excellent.

(Excellent indicates there is a strong likelihood the client will fully recover with minimal negative impacts on their daily functioning and quality of life.

Due to Andrea's current symptoms, diagnosis, current levels of distress, and functional impairment, it is my recommendation that she be allowed to work entirely remotely. The benefits of that accommodation will decrease her stress levels and increase her capacity for focus and concentration, which would benefit her job performance and quality of life.

Also, expediting the revision of her case by the Administration Separation Board would bring closure to Andrea. She is future-oriented and desires to return to a life with her family that would be more manageable.



Hannia L. Burke-Aguero, MA, LPC, RDT

Bilingual Bicultural Psychotherapist
Vice-Chair Diversity and Inclusion
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From:
Subject: Re: open door policy
Date: Nov 14, 2024 at 09:44:35
To: Kijpatanasilp, Nathi (Nate) MAJ USARMY 88 RD (USA)
nathi.o.kijpatanasilp.mil@army.mil

Roger sir. I appreciate your assistance.
Sent from my iPhone

On Nov 14, 2024, at 09:43, Kijpatanasilp, Nathi (Nate) MAJ USARMY 88 RD (USA) <nathi.o.kijpatanasilp.mil@army.mil> wrote:

Then number 4 is your next one up.

But you need to figure out if it's CG of 88th or MEDCOM because I don't know what your unit's hierarchy is.

From: [REDACTED]
Sent: Thursday, November 14, 2024 10:37 AM
To: Kijpatanasilp, Nathi (Nate) MAJ USARMY 88 RD (USA)
<nathi.o.kijpatanasilp.mil@army.mil>
Cc: Jordan, Sean W CPT USARMY 372 ENG BDE (USA) <sean.w.jordan4.mil@army.mil>
Subject: Re: open door policy

Good day,

it does involve the entire command, unfortunately.

Sent from my iPhone

On Nov 14, 2024, at 08:31, Kijpatanasilp, Nathi (Nate) MAJ USARMY 88 RD (USA) <nathi.o.kijpatanasilp.mil@army.mil> wrote:

So, typically through your chain of command. The hierarchy should be the commanders of:

1. Company
2. Battalion
3. Brigade
4. Division
5. USARC (last resort)

Unless the problem is in between numbers 1, 2, or 3.

--

Nathi O. Kijpatanasilp, MSCE, MSEM, PMP, CFI, C.M.
MAJ, EN
Commander, Higher Headquarters Detachment
88th Readiness Division
Fort Snelling, MN, and Fort McCoy, WI
M: (201) 838-5095
O: (612) 467-7552
E: Nathi.O.Kijpatanasilp.mil@army.mil

"Readiness, It's In Our Name!"

From: [REDACTED]
Sent: Thursday, November 14, 2024 5:36 AM
To: Kijpatanasilp, Nathi (Nate) MAJ USARMY 88 RD (USA)
<nathi.o.kijpatanasilp.mil@army.mil>
Cc: Jordan, Sean W CPT USARMY 372 ENG BDE (USA) <sean.w.jordan4.mil@army.mil>
Subject: Re: open door policy

Good morning! Apologies for my confusion.

As an AGR would I go to you guys next then or straight to HRC or USARC— if this open door with ARMEDCOM fails? Sorry... this stuff is hard to navigate and my

appointed JAG person PCS'd.

On Nov 13, 2024, at 21:48, Kijpatanasilp, Nathi (Nate) MAJ USARMY 88 RD (USA) <nathi.o.kijpatanasilp.mil@army.mil> wrote:

One more thing comes to mind.

CPT Jordan is aide for the 88th Readiness Division's CG.

That's a different Commanding General than the ARMEDCOM.

From: Kijpatanasilp, Nathi (Nate) MAJ USARMY 88 RD (USA)

Sent: Wednesday, November 13, 2024 10:06 PM

To: [REDACTED] <[\[REDACTED\]@army.mil](mailto:[REDACTED]@army.mil)>; Jordan, Sean W CPT USARMY 372 ENG BDE (USA) <sean.w.jordan4.mil@army.mil>

Subject: RE: open door policy

[REDACTED]tte, hi,

Thanks for reaching out.

CPT Jordan's email is in the to line.

Please let him know the basic information so he can assist with setting up the appointment.

--

Nathi O. Kijpatanasilp, MSCE, MSEM, PMP, CFI, C.M.

MAJ, EN

Commander, Higher Headquarters Detachment

88th Readiness Division

Fort Snelling, MN, and Fort McCoy, WI

M: (201) 838-5095

O: (612) 467-7552

E: Nathi.O.Kijpatanasilp.mil@army.mil

"Readiness, It's In Our Name!"

From: [REDACTED] >
Sent: Wednesday, November 13, 2024 7:10 PM
To: Kijpatanasilp, Nathi (Nate) MAJ USARMY 88 RD (USA)
<nathi.o.kijpatanasilp.mil@army.mil>
Subject: Fwd: open door policy

You don't often get email from [REDACTED].com. [Learn why this is important](#)
Good day sir,

Could you please forward this email inquiry to the aid de camp please? I was unable to find the email...

Thank you [REDACTED] te

Begin forwarded message:

From: [REDACTED]
Date: October 24, 2024 at 18:59:10 CDT
To: "Bailey, Eloria M SGT USARMY MEDCOM (USA)"
<eloria.m.bailey.mil@army.mil>
Subject: Re: open door policy

Thank you SGT Bailey.

On Oct 24, 2024, at 15:24, Bailey, Eloria M SGT USARMY MEDCOM (USA)
<eloria.m.bailey.mil@army.mil> wrote:

Good afternoon [REDACTED]

Please see the attached open-door policy for the 88th RD and ARMEDCOM CG.

Very Respectfully,

Eloria M. Bailey
SGT, Human Resource Sergeant
Suicide Prevention Program Liaison (SPPL)
7228th MSU
Office: 719.366.4964
Phone: 706.425.0227
Email: Eloria.m.bailey.mil@army.mil

<HHD PL 01 - Open Door Policy_072723.pdf>
<CG Policy # 22-01 Open Door Policy.pdf>

From:
Subject: AGR open door request
Date: Nov 14, 2024 at 13:35:49
To: sean.w.jordan4.mil@army.mil

Good day sir,

Just in case I don't get a response from ARMEDCOM — could you confirm if it is your commander I would ask to speak to next for myself since my COC has not been able to assist me. Any insight would be greatly appreciated.

[REDACTED]

[REDACTED]

Sent from my iPhone



AFRC-RMC-CG

01 August 2022

MEMORANDUM FOR DISTRIBUTION

SUBJECT: Army Reserve Medical Command (AR-MEDCOM) Open Door Policy

1. Reference AR 600-20, Army Command Policy, 24 July 2020.
2. Purpose. To provide guidance to all assigned Soldiers and Civilians on the AR-MEDCOM Open Door Policy.
3. Applicability. This policy is applicable to all Soldiers and Civilian personnel assigned to and/or under the operational control of the Army Reserve Medical Command.
4. Policy. All Soldiers and Civilian personnel of AR-MEDCOM will have access to the Commanding General regarding unresolved issues or concerns of a personal or professional nature for which they have been unable to resolve at lower levels in the chain of command.
5. Procedures.
 - a. Personnel should make every effort to use your chain of command prior to coming to see me. I will always ensure you, Soldier or Civilian, receive the support you need for success. However, the primary responsibility for your concerns is your immediate leadership. Regardless, if you need to see me personally, I ask that you let your chain of command know prior to scheduling an office call through my team at AR-MEDCOM.
 - b. If your chain of command is unable to resolve your issue, my door is open. For an appointment, contact MAJ Stacy T. Black, AR-MEDCOM SGS at 910-771-4905, or stacy.t.black.mil@army.mil.
 - c. This policy will be disseminated to all sections and be included as part of the orientation brief for newly assigned personnel.
6. Expiration. This policy memorandum will remain in effect until superseded or rescinded.

A handwritten signature in black ink, appearing to read "W. Scott Lynn", is written over a horizontal line.

W. SCOTT LYNN
Major General, MC, USAR
Commanding

AFRC-RMC-CG

SUBJECT: Army Reserve Medical Command Open Door Policy

DISTRIBUTION:

MRTC

APMC

CE-MARSG

SE-MARSG

NE-MARSG

WE-MARSG

AR-MEDCOM, HHD

From:
Subject: 7228 MSU SGT [REDACTED] OPEN DOOR POLICY REQUEST
Date: Nov 19, 2024 at 09:00:31
To: michael.g.pauls.mil@army.mil

Sir,

I'm requesting a appt with the CG to discuss my FOIA request and Admin separation.

LTC Mueller (even though he may have the best of intentions for the government) is hiding the fact that I was told by unit CDR and BDE CDR that I wouldn't get my leave extended while I was at a funeral in California if I didn't get the vaccine. They removed several things CPT Peterkin said and I'm afraid of them deleting supporting evidence that would support my case.

I forgive those who trespass against me and don't want to ruin anyone's career.

My family just can't afford to be screwed by bureacratic warfare

[REDACTED]

From:
Subject: Re: (7228th MSU) SG [REDACTED] -Open Door Policy Request
Date: Sep 25, 2024 at 11:36:50
To: Tom, Antonette A MAJ USARMY USAR MEDCOM (USA)
antonette.a.tom.mil@army.mil

Ma'am,

by chance, has there been a response for the open door policy request? I would just like to speak o we the phone if possible with the ARMEDCOM CDR.

Thank you.

On Aug 5, 2024, at 08:35, Tom, Antonette A MAJ USARMY USAR MEDCOM (USA) <antonette.a.tom.mil@army.mil> wrote:

Good morning CH(LTC) Pauls,

The Service member we spoke about is SGT [REDACTED]. She would like to speak with the General and is requesting to use the open-door policy.

SGT [REDACTED] is in one of the downtrace units the 7228 MSU in Columbia, MO. Her commander is LTC Lara Nells Brown. Her email is lara.n.brown3.mil@army.mil and telephone number is (626) 423-7674. I have attached her email she wrote for her request.

We are assigned to the 7455 MORU based out of Topeka, KS. Our BN Commander is Col. John Johnson and his email is john.a.johnsons22.mil@army.mil.

The Brigade Commander is Rodger Jackson, and his email is rodger.d.jackson@army.mil. We are with the 807th Medical Brigade at Fort Sheridan, IL and there is no brigade chaplain at this time.