



DEPARTMENT OF THE ARMY
U.S. ARMY TRIAL DEFENSE SERVICE
FORT KNOX, KENTUCKY 40121

ATCC-KNX-LAT

19 October 2020

MEMORANDUM FOR Commanders Imposing Article 15s

SUBJECT: Article 15 Consultations during COVID-19 Pandemic

1. IAW CDC and Army guidance, the Fort Knox Trial Defense Services Field Office will be conducting Article 15 client consultation through telephonic medium. Article 15 appointments will be flexible to meet command and client needs and scheduling conflicts. Guidelines are below.
2. In order to set a TDS appointment the Soldier's Chain of Command or servicing Military Justice Office will email **a signed copy** of the Article 15, **all evidence**, flag and ERB along with the attached **Client Data Card** to: usarmy.knox.usacc.mbx.trial-defense-service@mail.mil. TDS will then contact the identified Unit POC to schedule an appointment.
3. Prior to the appointment, the Soldier must be provided with the opportunity to thoroughly review the Article 15 and all evidence. At the designated appointment time, the Soldier must have **a copy of the Article 15, all evidence**, flag and ERB in front of him or her. The Soldier must also have a private place to discuss matters with the TDS personnel.
4. The point of contact (POC) for this memorandum is the undersigned, at rick.b.mathew.mil@mail.mil or (502) 298-8377. Alternate POC is Mr. Richard R. Biondi, at (502) 791-6476 or richard.r.biondi.civ@mail.mil.

RICK B. MATHEW
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Senior Defense Counsel

Data Required by the Privacy Act of 1974

AUTHORITY

Title 10, USC, Section 3013

PRINCIPAL PURPOSE

The purpose of this form is to assist the attorney in preparing legal documents for the client, and to prepare statistical reports on legal assistance services provided during the year. The information on this form is protected by the attorney-client privilege and may be released only in accordance with law or with approval of the client.

ROUTINE USES

Information on this form will be used to provide legal advice and to prepare legal correspondence and documents for the client, and to prepare statistical reports.

DISCLOSURE

Voluntary. However, nondisclosure may preclude the legal assistance desired by the client.

Date: _____

Last Name: _____ First Name: _____

Gender (mark with X): _____ M _____ F Rank/Grade: _____

SSN (**Last Four Only**): _____

DoD ID # (Located on the Bottom Reverse of CAC Card): _____

Cell Phone: _____

E-Mail Address: _____

Note: Please provide an email address that is regularly checked, civilian email address is acceptable.

Unit POC to coordinate appointment (i.e. CDR, 1SG): _____

Unit POC cell phone: _____ Unit POC email: _____

Company: _____

Battalion: _____

Brigade: _____

Visit Reason (Please mark with X):

_____ Under Investigation _____ Article 15 _____ Chapter Notification

_____ Court-Martial Charges _____ Other (Please Explain):