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ADMINISTRATIVE REMARKS (1070)

DATE	DATE	DATE
Articles UCMJ explained to me this date as required by Article 137, UCMJ.	Articles UCMJ explained to me this date as required by Article 137, UCMJ.	I have been counseled concerning SBP and fully understand the automatic enrollment and future enrollment provisions on the Plan.
(Signature)	(Signature)	(Signature)

(Date). Marine is/is not married and elected (REDUCED COVERAGE / DECLINED COVERAGE / ELECTED CHILD ONLY COVERAGE) under SBP, DD Form 2656 is notarized and signed by the spouse; forwarded to DFAS, Cleveland this date.

Signature

NAME (last, first, middle)	EDPI
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