



SWRMC ASSISTANT INSPECTOR GENERAL OFFICE FRAUD, WASTE, ABUSE, & MISMANAGEMENT COMPLAINT FORM

AUTHORITY: DoD Instruction 7050.01, SECNAVINST 5430.57 (series), SECNAVINST 5370.5 (series).
PRINCIPAL PURPOSE(S): To register a complaint relating to suspected Fraud, Waste, Abuse and/or Mismanagement.
ROUTINE USE(S): Data provided are furnished to supervisors, commanders or inspectors in response to queries for resolution of complaints and to eliminate conditions considered detrimental to the efficiency or reputation of the United States Navy.
DISCLOSURE: Disclosure of your identity and any other personal identifying information is voluntary. Failure to provide the information will not adversely affect the resolution of your complaint but may cause a delay in resolving the issue.
FALSE OFFICIAL STATEMENT WARNING: Use of this form constitutes a request for an official investigation of a person you assert has engaged in wrongful conduct. It is a crime to knowingly make a false fictitious or fraudulent statement or representation of material fact to induce government action. Knowing omission of a material fact is also a crime (18 USC 1001 and Art. 107 UCMJ).

We can only accept **UNCLASSIFIED** complaints via this form. Please go to www.dodig.mil to submit classified complaints.

SECTION I - YOUR IDENTITY

Anyone may file a complaint, regardless of who you are, and you are not required to identify yourself, except for allegations of reprisal. In order to remain anonymous, do not provide any identifying information below. You may also elect to remain confidential, or consent to the release of your identity and complaint outside of Navy IG channels.

If you remain anonymous, we will not be able to contact you to request additional information or provide you the status of your complaint. Remaining anonymous will not in and of itself affect the disposition of your complaint, however, if we are unable to reach out to you for additional information, we may dismiss your complaint.

We may also determine that your complaint should be referred outside of Navy IG channels, such as the chain of command (e.g. the Commanding Officer). Unless you are anonymous, we need your consent to provide your identity and complaint as part of our referral. If you wish to remain confidential and not provide your consent, we will provide a sanitized summary of your complaint instead of your actual complaint. If you give us your consent we will provide your actual complaint but redact your identity unless your identity is necessary to take action. If you wish to remain anonymous, we will provide your actual complaint as part of the referral.

Regardless of your selection, we will make every attempt to safeguard your identity, but we cannot guarantee confidentiality as we may be required to disclose your identity as part of an investigation, in the course of corrective action, as a result of a decision of the SWRMC AIG or as required by any applicable law, rule or regulation.

- I consent to the release of my identity and complaint outside of Navy IG channels.
- I wish to remain confidential.
- I wish to remain anonymous (proceed to Section III).

SECTION II - YOUR BIOGRAPHICAL INFORMATION *(Skip if Anonymous)*

Last Name	First Name	MI	Gender
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>

Street Address Line 1	Street Address Line 2
<input style="width: 98%;" type="text"/>	<input style="width: 98%;" type="text"/>

Zip Code	City	State	Country
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>

E-mail (Personal)	E-mail (Work)
<input style="width: 98%;" type="text"/>	<input style="width: 98%;" type="text"/>

Home #	Mobile #	Work #
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>

Your Status	Grade or Rank	Organization (i.e. Dept/Division/Code, if applicable)
<input style="width: 98%;" type="text"/>	<input style="width: 98%;" type="text"/>	<input style="width: 98%;" type="text"/>

How are you aware of the Hotline Program?	Is the Chain of Command aware of the complaint?
<input style="width: 98%;" type="text"/>	<input style="width: 98%;" type="text"/>



**SWRMC ASSISTANT INSPECTOR GENERAL OFFICE
FRAUD, WASTE, ABUSE, & MISMANAGEMENT COMPLAINT FORM**

SECTION III - SUBJECT INFORMATION (SUBMIT ADDITIONAL PAGES AS NEEDED)

SUBJECT 1

Last Name	First Name	MI
<input type="text"/>	<input type="text"/>	<input type="text"/>

Subject Status	Grade or Rank	Organization (i.e. Dept/Division/Code)
<input type="text"/>	<input type="text"/>	<input type="text"/>

SUBJECT 2

Last Name	First Name	MI
<input type="text"/>	<input type="text"/>	<input type="text"/>

Subject Status	Grade or Rank	Organization (i.e. Dept/Division/Code)
<input type="text"/>	<input type="text"/>	<input type="text"/>

SUBJECT 3

Last Name	First Name	MI
<input type="text"/>	<input type="text"/>	<input type="text"/>

Subject Status	Grade or Rank	Organization (i.e. Dept/Division/Code)
<input type="text"/>	<input type="text"/>	<input type="text"/>

Allegations Appropriate for an Inspector General

Please review the information below for examples of allegations that may be appropriate for a Navy Inspector General before proceeding.

- Abuse of Title or Position
- Bribes/Kickbacks/Acceptance of Gratuities
- Conflicts of Interest
- Ethics Violations
- False Official Statements/Claims
- Fraud
- Gifts (Improper receipt or giving)
- Mismanagement/Organization Oversight (Significant Cases)
- Misuse of Official Time, Gov't Property, Position and Public Office
- Political Activities
- Purchase Card Abuse
- Reprisal (Military Whistleblower Protection)
- Safety/Public Health (Substantial/Specific)
- Systemic Problems
- Time and Attendance (Significant Violations)
- Travel Card Abuse
- Travel Fraud (TDY and TAD)
- Waste (Gross)

Please be aware that we are not a law enforcement agency. Any allegations of criminal wrongdoing should be sent to the appropriate law enforcement agency, such as NCIS (www.ncis.navy.mil).



**SWRMC ASSISTANT INSPECTOR GENERAL OFFICE
FRAUD, WASTE, ABUSE, & MISMANAGEMENT COMPLAINT FORM**

SECTION IV - ALLEGATION INFORMATION (SUBMIT ADDITIONAL PAGES IF YOU NEED MORE SPACE)

What was done or not done that was wrong? Please be specific as you can, including which subject did what.

Where did this occur? Please be as specific as you can, including all locations and related information.

When did this occur? Please be as specific as you can, including all dates and times in chronological order.

How did this occur?

Why did this occur?

What law, rule or regulation do you think was violated? (if known)?

Who witnessed the wrongdoing? (Include first and last names, rank/pay grade, place of employment, etc.)



**SWRMC ASSISTANT INSPECTOR GENERAL OFFICE
FRAUD, WASTE, ABUSE, & MISMANAGEMENT COMPLAINT FORM**

SECTION V - ADDITIONAL INFORMATION

Have you contacted another official, or do you intend to use another process, e.g., congressional, EEO, chain-of-command or another IG to resolve this matter? If yes, please identify the official or process and the current status of the matter.

Briefly describe how you believe this office can assist you with your complaint.

For each additional document you are providing, please provide a title, date, description of content, and its relevancy.

Have you read the "Allegations Appropriate for an Inspector General" description on the bottom of page 2?

- No, I have not.
- Yes, I have.

Do you believe your allegations fall into the category of allegations appropriate for an Inspector General?

- No, I do not.
- Yes, I do.

By submitting this form, you certify all statements made in this complaint are true, complete, and correct to the best of your knowledge and / or belief. **You understand that your complaint will not be reviewed if you fail to certify this document by selecting the appropriate response below, or if you select the not certify option.** You further understand that a false statement or concealment of a material fact is a criminal offense (18 U.S.C. Section 1001; Inspector General Act of 1978, as amended, Section 7; and / or the Uniform Code of Military Justice, Article 107). This information is submitted for the basic purpose of requesting assistance, correcting injustices affecting the individual, or eliminating conditions considered detrimental to the efficiency or reputation of the Navy.

- No, I do not so certify.
- Yes, I so certify.



**SWRMC ASSISTANT INSPECTOR GENERAL OFFICE
FRAUD, WASTE, ABUSE, & MISMANAGEMENT COMPLAINT FORM**

SECTION VI - PRIVACY ACT INFORMATION

DATA REQUIRED BY THE PRIVACY ACT OF 1974

PRIVACY ACT STATEMENT For Personal Information Taken During Inspector General Interviews.

AUTHORITY: Title 10 US Code, Sections 5014 and 5020.

PURPOSE: To determine the facts and circumstances surrounding allegations or complaints against Navy/Marine Corps personnel and/or activities. To present findings, conclusions and recommendations developed from investigations and other inquiries to the Secretary of the Navy, CNO, CMC, or other appropriate commanders. Disclosure of Social Security Account Number is voluntary, and if requested, is used to further identify the individual providing the information.

ROUTINE USES: The information is used for the purpose set forth above and may be:

- a. Forwarded to federal, state or local law enforcement agencies for their use;
- b. used as a basis for summaries, briefings or responses to Members of Congress or other agencies in the Executive Branch of the Federal Government;
- c. provided to Congress or other federal, state and local agencies, when determined necessary.

MANDATORY OR VOLUNTARY DISCLOSURE AND EFFECT ON INDIVIDUAL NOT PROVIDING INFORMATION:

- a. For Military Personnel: Disclosure of personal information is mandatory and failure to do so may subject the individual to disciplinary action.
- b. For Department of the Navy Civilians: Failure to disclose personal information in relation to your position responsibilities may subject the individual to adverse personnel action.
- c. For All Other Personnel: Disclosure of personal information is voluntary and no adverse action can be taken against individuals for refusing to provide information about themselves.

ACKNOWLEDGEMENT

I understand the provisions of the Privacy Act of 1974 as related to me through the foregoing statement.

Signature

Date

THANK YOU FOR BRINGING THIS COMPLAINT TO OUR ATTENTION

Submit completed forms along with all supporting documents to:

Email: swrmc.ighotline@navy.mil
 Mail: Southwest Regional Maintenance Center (SWRMC)
 Assistant Inspector General
 3755 Brinser Street, Suite 1
 San Diego, CA 92136



**SWRMC ASSISTANT INSPECTOR GENERAL OFFICE
FRAUD, WASTE, ABUSE, & MISMANAGEMENT COMPLAINT FORM)**

SECTION VII – Additional Allegation Information Writing Area

This area is for you to provide additional information that would not fit within the boxes above:

[Empty writing area for additional allegation information]