DEPARTMENT OF THE NAVY
BUREAU OF NAVAL PERSONNEL
5720 INTEGRITY DRIVE
MILLINGTON TN 38055-0000

5720
PERS 00J6/20210308
April 21, 2021

Ms. Kayla Anderson
Kenny Leigh & Associates
76 South Laura Street, Suite 1470
Jacksonville, FL 32202

Dear Ms. Anderson:

SUBJECT: YOUR FREEDOM OF INFORMATION ACT (FOIA) REQUEST

This is in response to your Freedom of Information Act (FOIA) request of April 21, 2021. You seek a copy of a DD Form 214 and other discharge documentation pertaining to Amber L. Owens. This command received your request on April 21, 2021. Your FOIA request number is 2021-005824 and FOIA correspondence file number is 20210308.

A releasable copy of a responsive DD Form 214 is enclosed. The redacted portions of the released document is exempt from disclosure under FOIA exemption 6 [5 U.S.C. § 552(b)(6)]. Release of such information would constitute a clearly unwarranted invasion of the personal privacy of Amber L. Owens other identified individuals. Any available underlying discharge documentation is exempt in full from disclosure under FOIA exemption 6 for the same reason as noted above.

I am the official responsible for the partial denial of your request. You have the right to an appeal. Should you wish to submit an appeal, it must be received within 90 calendar days from the date of this letter. Please provide a letter requesting an appeal and include a copy of your initial request and a copy of this partial denial letter. You are encouraged (though not required) to provide an explanation why you believe the redactions were inappropriate. Also, please provide a copy of your appeal letter to us at Bureau of Naval Personnel, PERS Code 00J6, 5720 Integrity Drive, Millington, TN 38055.

There are two ways to file an appeal—through FOIAonline or by mail.

1. Through FOIAonline. This will work only if you set up an account on FOIAonline before you make the request that you would like to appeal. To set up an account, go to FOIAonline (this is a website that will appear as the top

hit if you search the internet for "FOIAonline"), click "Create Account" (a link located within the blue banner at the top in the upper right corner), enter your data into the field that subsequently appears, and click "Save" (at the bottom left of the screen). With your account thereby created, you will have the power to file an appeal on FOIAonline to any request you file on FOIAonline thereafter. To do so, locate your request (enter a keyword or the request tracking number in the "Search for" field on the "Search" tab), click on it, then the "Create Appeal" tab in the left-hand column. Complete the subsequent field, click "Save," and FOIAonline will submit your appeal.

2. By mail. Address your appeal to:

The Judge Advocate General (Code 14)
1322 Patterson Avenue SE
Suite 3000
Washington Navy Yard, DC 20374-5066

[Note: the preceding address is the default address. Alternatively, it may be sent to the Department of the Navy General Counsel if appropriate (the Office of the General Counsel generally handles issues outside of those of the uniformed service). That address is as follows:

Department of the Navy
Office of the General Counsel
1000 Navy Pentagon, Room 5A532
Washington, DC 20350-1000

If you have any questions, please contact me at david.german@navy.mil or (901) 874-3165. You may also contact the DON FOIA Public Liaison, Christopher Julka, at christopher.a.julka@navy.mil, (703)697-0031. In addition, the Office of Government Information Services (OGIS) provides a voluntary mediation process for resolving disputes between

persons making FOIA requests and the Department of the Navy (DON). For more information, go to https://www.archives.gov/ogis/about-ogis/contact-information.

Sincerely,

David P. German

D. P. GERMAN
FOIA/PA Officer

CAUTION: NOT TO BE USED FOR IDENTIFICATION PURPOSES | THIS IS AN IMPORTANT RECORD. SAFEGUARD IT. | ANY ALTERATIONS IN SHADED AREAS RENDER FORM VOID

CERTIFICATE OF RELEASE OR DISCHARGE FROM ACTIVE DUTY

This Report Contains Information Subject to the Privacy Act of 1974, As Amended.

1. NAME (Last, First, Middle)	2. DEPARTMENT, COMPONENT AND BRANCH	3. SOCIAL SECURITY NUMBER
OWENS, AMBER LEIGH	NAVY-USN	(b)(6)

4a. GRADE, RATE OR RANK	b. PAY GRADE	5. DATE OF BIRTH (YYYYMMDD)	6. RESERVE OBLIGATION TERMINATION DATE (YYYYMMDD)
AZ1	E6	(b)(6)	NA

7a. PLACE OF ENTRY INTO ACTIVE DUTY	b. HOME OF RECORD AT TIME OF ENTRY (City and state, or complete address if known)
(b)(6) MO	(b)(6) IL (b)(6)

8a. LAST DUTY ASSIGNMENT AND MAJOR COMMAND	b. STATION WHERE SEPARATED
HSM 40	PERSUPPDET MAYPORT

9. COMMAND TO WHICH TRANSFERRED	10. SGLI C (b)(6)
NA	AMOUN

11. PRIMARY SPECIALTY (List number, title and years and months in specialty. List additional specialty numbers and titles involving periods of one or more years)

F02A OPTIMIZED NALCOMIS SYSTEM ADMINISTRATOR/ANALYST OMA 5YRS 4MOS X
X X X X X X
X X X X X X
X X X X X
X X X X X

12. RECORD OF SERVICE	YEAR(S)	MONTH(S)	DAY(S)
a. DATE ENTERED AD THIS PERIOD	2009	02	18
b. SEPARATION DATE THIS PERIOD	2021	01	28
c. NET ACTIVE SERVICES THIS PERIOD	11	11	11
d. TOTAL PRIOR ACTIVE SERVICE	00	00	00
e. TOTAL PRIOR INACTIVE SERVICE	00	00	00
f. FOREIGN SERVICE	00	00	00
g. SEA SERVICE	00	09	21
h. INITIAL ENTRY TRAINING	00	04	13
i. EFFECTIVE DATE OF PAY GRADE	2019	12	16

13. DECORATIONS, MEDALS, BADGES, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED (All periods of service)

GOOD CONDUCT MEDAL (3);GLOBAL WAR ON TERRORISM EXPEDITIONARY MEDAL (13FEB17 TO 19JUL17);GLOBAL WAR ON TERRORISM SERVICE MEDAL (1);HUMANITARIAN SERVICE MEDAL (1);NAVY AND MARINE CORPS ACHIEVEMENT "SEE REMARKS"

14. MILITARY EDUCATION (Course title, number of weeks, and month and year completed)

RECRUIT BASIC MILITARY TNG, 12 WKS, APR09; AZ CLASS A1, 11 WKS, JUN09; CONFIG MGNT CRS, 1 WKS, DEC09; NALCOMIS/ANALYST CORE, 6 WKS, AUG15; NALCOMIS AV MNT IMA SYSADM/ANA, 13 WKS, SEP15; NALCOMIS AVIA MNT OMA SA/ANALY, 5 WKS, SEP15

		YES		NO
15a. COMMISSIONED THROUGH SERVICE ACADEMY		YES	X	NO
b. COMMISSIONED THROUGH ROTC SCHOLARSHIP (10 USC Sec. 2107b)		YES	X	NO
c. ENLISTED UNDER LOAN REPAYMENT PROGRAM (10 USC Chap. 109) (If Yes, year of commitment: _____)		YES	X	NO

16. DAYS ACCRUED LEAVE PAID (b)(6)

17. MEMBER WAS PROVIDED COMPLETE DENTAL EXAMINATION AND ALL APPROPRIATE DENTAL SERVICES AND TREATMENT WITHIN 90 DAYS PRIOR TO SEPARATION YES NO (b)(6)

18. REMARKS

(b)(6) b)(6)
(b)(6) . (b)(6)
(b)(6) .;SERVICE MEMBER POST SEPARATION PHONE NUMBER: (b)(6) ;SERVICE MEMBER POST SEPARATION EMAIL ADDRESS: X
"CONTINUED ON DD-214C" X X X X X X X X X

The information contained herein is subject to computer matching within the Department of Defense or with any other affected Federal or non-Federal agency for verification purposes and to determine eligibility for, and/or continued compliance with, the requirements of a Federal benefit program.

19a. MAILING ADDRESS AFTER SEPARATION (Include ZIP Code)	b. NEAREST RELATIVE (Name and address - include ZIP Code)
(b)(6)	(b)(6)
(b)(6)	

20. MEMBER REQUESTS COPY 6 BE SENT TO (Specify state/locality) __ (b)(6) __ OFFICE OF VETERANS AFFAIR (b)(6)

a. MEMBER REQUESTS COPY 3 BE SENT TO THE CENTRAL OFFICE OF THE DEPARTMENT OF VETERANS AFFAIRS (WASHINGTON, DC)

21a. MEMBER SIGNATURE	b. DATE (YYYYMMDD)	22a. OFFICIAL AUTHORIZED TO SIGN (Typed name, grade, title, signature)	b. DATE (YYYYMMDD)
(b)(6)	20210209	(b)(6) GS7, Authorizing Official	20210209

SPECIAL ADDITIONAL INFORMATION (For use by authorized agencies only)

23. TYPE OF SEPARATION	24. CHARACTER OF SERVICE (Include upgrades)	
Discharged	(b)(6)	
25. SEPARATION AUTHORITY	N CODE	27. REENTRY CODE
(b)(6)	(b)(6)	(b)(6)

28. NARRATIVE REASON FOR SEPARATION

(b)(6)

29. DATES OF TIME LOST DURING THIS PERIOD (YYYYMMDD)	30. MEMBER REQUESTS COPY 4 (Initials)
(b)(6)	(b)(6)

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CERTIFICATE OF RELEASE OR DISCHARGE FROM ACTIVE DUTY *(Continuation Sheet)*

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OWENS, AMBER LEIGH	NAVY-USN	(b)(6)

(Specify the item number of the block continued for each entry.)

BLK 13 CONT: MEDAL(3);SEA SERVICE DEPLOYMENT RIBBON (1);

BLK 18 CONT: (b)(6) (BLOCK 21) (b)(6)

(b)(6)

(b)(6)

21a. MEMBER SIGNATURE	b. DATE *(YYYYMMDD)*	22a. OFFICIAL AUTHORIZED TO SIGN *(Typed name, grade, title, signature)*	b. DATE *(YYYYMMDD)*
(b)(6)	20210209	(b)(6) GS7, Authorizing Official	20210209