

## FINAL PAY ADJUSTMENT AUTHORIZATION

I \_\_\_\_\_ am being released from Active Duty for reasons other than retirement and I currently have an outstanding debt due to Army Emergency Relief of \$\_\_\_\_\_ and that, in accordance with my original promissory note, I am still personally liable for this debt after my release from Active Duty.

As part of my separation, I will attempt to pay this debt in full from my final pay by executing a Pay Adjustment Authorization (DD Form 139) that will be submitted to the local Finance Officer by the AER Officer.

I further understand that there may not be sufficient funds in my final Active Duty pay to cover my debt owed to Army Emergency Relief. In the event that my final pay does not satisfy my debt to Army Emergency Relief, I still remain personally liable for any remaining balance due to Army Emergency Relief.

In the event that my final pay is not sufficient to settle my debt in full, Army Emergency Relief will notify me by letter at the address shown below of the balance of my remaining debt and send me monthly statements. Upon receipt of the monthly statement, I will remit payment in the amount shown on the statement until the debt is fully paid.

I have read and understand the above information, and I have been provided a copy of this form/agreement.

DOD ID #:	Client ID:
Print Name:	Date:
Signed:	
Address:	
Email:	Phone:
AERO/AAERO Witness:	Section: