

SAMPLE FAMILY CARE PLAN

1740.13
JQM
28 Mar 2007

From: GySgt John Q. Marine 555-55-5555
To: Commanding Officer, Headquarters Battalion, Henderson Hall, Marine Corps
National Capital Region

Subj: FAMILY CARE PLAN

Ref: (a) MCO 1740.13A

Encl: (1) Home Information
(2) Legal Information
(3) Logistics Information
(4) School Information
(5) Religious Information
(6) Financial Information
(7) Medical Information

1. In accordance with Single Parent submission criteria outlined in reference (a) the following Family Care Plan (FCP) is established for my son, David Marine 222-22-2222.
2. I certify that the following information provided within this FCP is complete – aspects of which are legally binding. Enclosures (1) through (7) include true certified copies for the record and will be updated as required.
3. This FCP outlines those actions to be taken by me or other designated persons acting on my behalf in the event that I must deploy under military orders issued by the United States Marine Corps. Deployed circumstances include planned temporary additional duty (TAD) or unplanned mobilization during military contingency or time of war. In circumstances warranting deployment on official military orders, I recognize the following persons as authorized caregivers for David Marine during my absence:

Priority I – Cheryl Lynn Jones
Priority II – Jack and Jill Smith
Priority III – Henry and Jane Marine
Priority IV – Paul and Pat Mills
Priority V – James Brown
Priority VI - Jackie Robinson

Priority 1-IV care givers named above have each been provided with a special Power of Attorney (POA) to serve as my Attorney-in-Fact when deployed. Priority IV-VI caregivers have been authorized by me to pick-up or drop off my son from school.

4. In agreement with each of the designated caregivers, I intend to authorize care for my son, David, in the following prioritized manner when responding to planned or unplanned deployment circumstances.

Planned: Arrangements will be made with the Priority I caregiver from her home. Should she be unavailable, arrangements will be made with either the Priority II/III caregivers to travel here and care for David from my home. Should either be unavailable, the Priority IV caregivers will temporarily care for David from their home until such time when another caregiver becomes available.

Unplanned: Arrangements will be made with the Priority I caregiver to care for David from her home. Should she be unavailable, arrangements will be made with the priority IV caregivers to temporarily care for David from their home until such time when another caregiver becomes available.

Special Circumstances: Should unexpected circumstances temporarily dictate my inability to reach home, Priority IV/V/VI caregivers are authorized to pick up or drop off David at school. Each is authorized to temporarily care for David from their home until such time as arrangements can be made with one of the other caregivers, or I return.

5. A brief description of the enclosure follows:

- (1) Home Information: Details include location, map, directions, and contact information for my home in Cavalier Manor, Fairfax, Virginia. Contact information is included for my current Mortgage Company and Homeowners Association.
- (2) Legal Information: Details include information concerning my legal divorce, all special powers-of-attorney for caregivers, and aspects of my last will and testament.
- (3) Logistic Information: Details include location, map, directions, and caregivers and/or related information.
- (4) School Information: Details include school and daycare locations, map, directions, director'/teachers'/counselors' names and contact information.
- (5) Religious Information: Details include parish locations, maps directions, and priest/staff contact information.

- (6) Financial Information: Details include information about banking, investments, federal & State taxes, property and community taxes/fees, and planned financial authorization.
 - (7) Medical Information: Details include information about TRICARE Prime and Armed Forces Medical Dental Plan (AFMDP), the location of medical and dental records, and proof of birth registration.
6. Revisions to this FCP are not authorized without my expressed verbal approval. Such approval will be communicated to the Commander Officer, or his designated representative acting in command, and to those authorized caregivers previously identified.
7. FCP point of contacts is John Q Marine. Work phone (555) 555-5555, or e-mail: john.marine@usmc.mil

J. Q. Marine

**Copy to: Family Readiness Officer, Headquarters Battalion, Henderson Hall
Deputy Director, Strategy and Plans Division, HQMC
Cheryl Lynn Jones
Jack and Jill Smith
Henry and Jane Marine
Paul and Pat Mills
James Brown
Jackie Robinson**