

DEPARTMENT OF THE ARMY
U.S. Army Medical Department Center and School
2250 Stanley Road
Fort Sam Houston, Texas 78234-6100

Memorandum
Number 25-7

3 January 1996

Information Management
PUBLICATIONS AND BLANK FORMS

1. **PURPOSE.** To prescribe the policies, procedures, and responsibilities for requisitioning DA publications, U.S. Army Medical Department Center and School (AMEDDC&S) administrative publications, AMEDDC&S academic materials, and blank forms within the AMEDDC&S.

2. **REFERENCES.**

a. AR 25-30, The Army Integrated Publishing and Printing Program.

b. DA Pam 25-30, The Standard Army Publication System (STARPUBS): User's Guide, published quarterly.

c. DA Pam 710-2-1, Using Unit Supply System.

d. AMEDDC&S Reg 351-16, Programs of Instruction.

e. AMEDDC&S Memo 25-5, Copier Equipment

f. AMEDDC&S Memo 25-50, Correspondence/Administrative Publications Guide.

g. AMEDDC&S Cir 350-3, AMEDDC&S Schedule of Classes.

3. **SCOPE.** This memorandum is applicable to all elements assigned or attached to the AMEDDC&S at Fort Sam Houston and Camp Bullis, Texas. Requests for forms and publications, may be submitted by fax to the Publications & Forms Section (PFS) at extension 13806 for supported activities requesting services.

4. **EXPLANATION OF TERMS.**

a. DA Publications (Administrative). Any DA administrative publication acquired by authorized AMEDDC&S pinpoint account holders for use by permanent party personnel.

b. DA Publications (Student Reference Material). The DA publications acquired by the PFS for the sole purpose of issuing to students in support of resident classes at AMEDDC&S. Please

*This memorandum supersedes AMEDDC&S Reg 310-1, 1 Mar 88.

see reference AR 25-30, Chapter (Chap) 12, Section V, paragraph (para) 12-23, for more information.

c. AMEDDC&S Academic Material. General reference (GR), special text (ST), program of instruction (POI), and mimeos published as supplementary literature for support of resident and nonresident instruction.

d. -R Forms. A -R form is defined as a form designated for local reproduction in accordance with (IAW) AR 25-30, Chap 3, Section I, para 3-14.

(1) If your entire activity uses three or four copies of a form each month or the form is used once annually for a report or similar situations, a clean photocopy of the form will suffice, and is authorized for generation on your office copier. Total copies annually should not exceed 25 copies per original. If the form is used abundantly throughout your activity and even throughout the command, the form will be stocked for issue from the PFS and can be requested utilizing DA Form 17, Requisition for Publication and Blank Forms. A good example of this is AMEDDC&S Form 1045-R-E, List of Files. When you exceed the usage of this form, it is more economical to stock this form on the shelf for monthly requisitions.

(2) A camera-ready master for all -R forms is found in the prescribing publication for that form. When requesting reproduction of the form, remove the master from the publication and reproduce a copy of the form and request requisition of the form for printing. In the case of DD, DA, and other Armywide forms, these masters are not available through the U.S. Army Printing and Publications Command, therefore, you must have the prescribing publication or have access to a master of the form. Masters of some local forms may be available through the Forms Management Officer (FMO).

5. RESPONSIBILITIES.

a. Publications & Forms Section

(1) Student references. Student reference materials, i.e., GRs, STs, POIs, and mimeos in support of resident classes will be stocked by the proponent activity.

(2) Support requirements. The PFS will requisition, stock, issue, control blank forms, and student and AMEDDC&S publications in support of all administrative elements of AMEDDC&S. Blank forms used solely for instructional purposes must be overprinted or stamped with the word "SAMPLE" in large letters, in compliance with provisions of AR 25-30, Chap 3, Section III, para 3-19e. Overprint transparencies with the word "SAMPLE" will be made available upon request.

(3) Publications support. Maintains and issues copies of DA publications for support of student courses and AMEDDC&S administrative publications for supplemental issue as required by the AMEDDC&S staff.

(4) Printing requirements will be processed by the Printing Work Order Clerk in the Distribution Center, Administrative Operations Branch, Administrative Services Division (ASD) (Rm 033A, Bldg 2840).

b Commanders, Staff Office and Activity Chiefs will:

(1) Control printing cost. Review requirements for PFS support on a continuing basis, while keeping mindful for areas in which printing costs can be reduced by use of more economical methods or resources. Approve printing requests for only genuine requirements.

(2) Inventory forms. Reduce inventories of unnecessary blank forms through a review of local forms originated by your office on an annual basis. If a form is not used, rescind the form(s) by notifying the FMO, ATTN: MCCS-IA, Stop Number 09a, by informal memorandum.

(3) Inventory publications. Control proliferation of publications. Require your staff to review annually publications originated by your activity. If a publication is no longer required, rescind the publication(s) by notifying the AMEDDC&S Publication Control Officer (PCO), ATTN: MCCS-IAD, Stop Number 09a, by informal memorandum. Use the guidance outlined in AR 25-30 and AMEDDC&S Memo 25-50.

(4) Appoint controllers/coordinators. Activities no lower than department/battalion and above may appoint primary and alternate forms and publications controllers. This is a recommended internal procedure within each activity; however, this is not a prerequisite to order blank forms or publications. Use AMEDDC&S Form Letter 261, Duty Appointment/Assignment, for this purpose.

6. DA ADMINISTRATIVE PUBLICATIONS.

a. Any DA administrative publications may be obtained through activity pinpoint accounts. These accounts should be reviewed and updated annually. All requests for 12-series requirement should be forwarded to the PCO, ATTN: MCCS-IAD, Stop Number 09a.

b. Requisitions of administrative publications for the AMEDDC&S Special Staff will be submitted by the Special Staff to the PFS using DA Form 17. See Appendix A for an example of a completed DA Form 17. The Special Staff may also requisition DOD, DA, and AMEDDC&S publications from the PFS on DA Form 17-E.

Each requisition must include a telephone and fax number in block 6 of DA Form 17 or 17-E.

c. Request for administrative publications may be requested at any time the need is substantiated.

7. DA PUBLICATIONS (Student Reference Material).

a. DA publications will be issued to resident students as reference material and will be turned in upon completion of each course. Reference AR 25-30, Chap 12, Section V, para 12-23a.

b. DA publications support may be requested for each course of instruction taught at the AMEDDC&S as found in AMEDDC&S Circular (Cir) 350-3. A written request for support will contain the following:

Course number as found in AMEDDC&S Cir 350-3

(2) Office symbol, name, phone number, and fax number of the Course Advisor in charge of the course.

(3) A list of the publication by publication number required for the students, reference DA Pam 25-30.

(4) A separate list, if required, of the publication required for lesson plan writing.

(5) Request a Walk-thru Issue or Bulk Issue. See subpara c below.

Signed by the Senior Course Advisor.

Submit the request to the PFS, ATTN: MCCS-IAP.

c. The issuing of resident student publications will be accomplished either by Walk-thru Issue or Bulk Issue.

(1) Walk-thru Issue/Return. After the request is received, a printed copy of the course requirements is created. An example is provided in Appendix C. A printed copy will be forwarded to the Course Advisor. The Course Advisor will use a copy of this sheet to request a Walk-thru Issue/Return by filling in the blanks and sending to the PFS at least 30 days before an issue and 7 days before a turn-in of publications. Both issue and return may be requested at the same time. Changes to course requirements can be made using this same sheet by crossing out or adding publications as required. The PFS will package the publications and issue them to the students at Bldg 902 where students will sign for and later return their publications. This receipt will be returned to the student when the publications are returned to the PFS. Course Advisors will notify the PFS of

students that are permitted early or late issues/turn-ins. The PFS will not deal directly with the students.

(2) Bulk Issue. After the request is received, a printed copy of the course requirements is created. An example is provided in Appendix C. A complete set of publications will be issued to the Course Advisor who is solely responsible for the issue and retrieval of the publications from the students. The Course Advisor can use a copy of the sheet to request replacements for worn or lost publications and make changes to requirements, or any other matter affecting the course. The PFS will stock 20 percent of a bulk issue for replacements.

d. When a publication is superseded, PFS will issue five copies of the new publication to each Course Advisor for their course's reference library. The PFS will make the necessary changes to the requisition/turn-in requests as exhibited in Appendix C. Courses that have bulk issue will be issued the necessary publications to support their course's requirements. Notification will be sent through AMEDDC&S distribution along with five copies of the publications to each Bulk Issue Course Advisor. Publications will be available for pickup at Bldg 902. Course Advisors are responsible to notify PFS within 1 month or the publications will be deleted from the course requirements. Publications that are deleted by DA Pam 25-30 will be deleted from the course requirements and no action is required by the Course Advisor.

8. AMEDDC&S ADMINISTRATIVE PUBLICATIONS. Administrative publications are to be used to conduct the day-to-day operations of the command. Although these publications are generally considered guidelines, the AMEDDC&S commander expects adherence to them as a routine practice.

a. The AMEDDC&S administrative publications include AMEDDC&S supplements, regulations, pamphlets, memorandums, circulars, and bulletins. Personnel from within the ASD, Information Management Directorate, are available to advise the proponents on the proper format and series number for each proposed publication. Descriptions and sample formats for AMEDDC&S administrative publications can be found in AMEDDC&S Memo 25-50, Chap 2. The content of each publication is the sole responsibility of the proponent.

b. The PCO must maintain the original or master of each administrative publication and monitor its periodic review (approximately every 18 months). Update and reprint of these publications are IAW AR 25-30 and local policy. If an original or master of a publication is inadvertently returned to the proponent office along with the printing order, return immediately to the PCO. Retention of the master by the PCO is required. The PCO is located in Rm 036, Bldg 2840 (Aabel Hall).

c. New or revised AMEDDC&S administrative publications must be properly staffed/coordinated prior to submission for final approval by the Secretary of the General Staff (SGS). Upon approval by the SGS, the proposed publication will be signed by the Adjutant General, and printing is ordered by the PCO. Initial distribution of administrative publications is performed by the AMEDDC&S Distribution Center. Procedures for these actions are discussed in AMEDDC&S Memo 25-50, Chap 2.

d. Printing of AMEDDC&S administrative publications may only be requested by the PCO. The initial distribution of new or revised publications is accomplished by the Distribution Center, as mentioned above. Distribution is made based on guidance indicated by the proponent on each publication. See the PCO or AMEDDC&S Memo 25-32, Printing and Distribution Services, for distribution criteria. A limited stock (normally 50 copies) of each AMEDDC&S publication should be listed in the distribution scheme of each administrative publication. These copies will be maintained by the PFS for use in resupply. Increases or "mission unique" one-time bulk requirements of an administrative publication, by the proponent, will be coordinated between the requesting proponent or activity and the PFS, who will request any additional printings from the PCO.

e. An index of Administrative Publications (AMEDDC&S Pam 25-30) will normally be printed and distributed every 18 months. Notices regarding new publications, revisions, or rescissions will be announced in the AMEDDC&S Weekly Bulletin by the PCO as publication occurs.

9. AMEDDC&S ACADEMIC MATERIAL (GRs, STs, POIs, Mimeos).

a. Academic material published by Academy of Health Sciences (AHS) instructional departments, in bulk, must be stored by the requesting activity.

b. Instructional departments are solely responsible for maintaining their individual stock of academic material. Materials should be reviewed quarterly and obsolete or revised material removed from stock.

10. BLANK FORMS

a. Forms Management Officer

(1) To request approval of a new or revised AMEDDC&S form, complete an original and one copy of DD Form 67, Form Processing Action Request, and submit to the ASD, ATTN: MCCS-IA (Forms Manager), along with a clean, camera-ready original of the proposed form. The request must be accompanied by the prescribing publication which can be a Standing Operating Procedure. An example of a completed DD Form 67 may be found in Appendix B.

Approved forms will be assigned a form number IAW AR 25-30 and AMEDDC&S Memo 25-50. A revised form retains the same form number as the form it is superseding, with a new edition date. However, older forms that still bear the old AHS form number prefix will be redesignated AMEDDC&S forms upon revision, but will still retain the same form number as its former AHS form version.

(2) Initial distribution and the level of reserve stock can only be determined by the proponent, based on projected usage of the form. Open stock blank forms will be maintained in the PFS. Requisitions for AMEDDC&S Blank Forms will be submitted IAW para 10c below. Use DA Forms 17 and 17-1 to requisition blank forms, utilizing the schedule provided by the PFS. See Appendix D for schedule.

(3) The Forms Manager will prepare the initial printing workorder upon approval of the form and provide the PFS with initial stock of the form. The PFS Forms Clerk will request resupply of open stock forms from the Forms Manager, as necessary. Proponent controlled forms will be ordered directly from the Forms Manager utilizing a separate DA Form 17 than the one which is sent to the PFS. The Forms Manager will order a resupply printing workorder of these forms using the master.

b. Forms Controller

(1) General forms accounts will be granted upon receipt and approval of a written request from department/battalion or higher. Activities geographically located away from their higher headquarters under special circumstances may be granted their own forms account.

(2) DA Form 1687, Notice of Delegation of Authority-Receipt for Supplies. Activities (AMEDDC&S directorates/AHS department chiefs/separate activities) may desire to delegate representatives specifically designated to requisition/pick up forms requisitions. If this option is selected, complete DA Form 1687, indicating delegated representative(s).

(3) Restrictions. If this option is adopted, activities should understand that only the individuals listed on DA Form 1687 will be authorized to requisition or pick up material for that activity. Up to four individuals may be designated if this method is adopted. In addition, DA Form 1687 must be updated to reflect personnel changes, i.e., Expiration Term of Service, Permanent Change of Station, as they occur. (Review DA Pam 710-2-1 on the use of DA Form 1687.)

(4) Forms supply. Activities are responsible to maintain a 60-day supply of blank forms for their activity.

c. Blank Form Requisitions (DA Form 17).

(1) Normal requisitions. Requests for normal resupply of blank forms will be submitted in duplicate on DA Form 17 and 17-1. Photocopies of DA Form 17 or 17-1 will not be acceptable. When using the electronic version of the form, simply run two copies of the form. Instructions for preparing DA Form 17 are on the reverse side of the form.

(2) Requisitions. Regular requisitions will be submitted once each month IAW the schedule provided by the PFS.

(3) Special requisitions. This type of requisition is used to obtain unprojected blank form requirements. Requisitions will be submitted on DA Form 17 and must be picked up within 2 working days after submission of the special request. Special requisitions require a valid justification entered in block 2 of DA Form 17. Unsatisfactory or unjustified requisitions will be returned for proper justification by the PFS Forms Clerk to the requesting activity. Two special requisitions (monthly per activity) will be allowed. Justification will be submitted to the PFS, ATTN: MCCS-IAP (PFS Forms Clerk). Special requisitions and sensitive forms will be picked up and signed for at the PFS.

(4) Anticipated increases. Changes in monthly blank form usage will be reported to the AMEDDC&S Forms Control Clerk via informal memorandum as soon as requirements are known.

(5) Systematic ordering. This process will enhance your ability to establish realistic and adequate stock levels and help eliminate unnecessary due-outs.

d. Sensitive and Accountable Blank Form Requisitions.

(1) Sensitive forms. Each sensitive form being requisitioned must be requisitioned on a separate DA Form 17 and signed for.

(2) Accountable forms. Each accountable form being requisitioned must be requisitioned on a separate DA Form 17. Accountable forms controllers will be appointed IAW para 10b(2) above.

REQUISITION FOR PUBLICATIONS AND BLANK FORMS <small>For use of this form, see AR 25-30; the proponent agency is ODISC4</small>				PAGE <u>1</u> OF <u>2</u> PAGES		DATE OF REQUISITION 1 Dec 95		REQUISITION NUMBER <small>(Assigned by Supply Source)</small>	
NAME OF REQUISITIONING AGENCY IF DIFFERENT FROM "SHIP TO" ADDRESS						ACCOUNT NO.			
1. TYPE OF REQUISITION <input checked="" type="checkbox"/> REGULAR <input type="checkbox"/> SPECIAL		2. JUSTIFICATION FOR SPECIAL REQUISITION						3. REQUIRED DATE <small>(Use Julian date)</small>	
4. ITEMS REQUESTED HEREON ARE <input checked="" type="checkbox"/> ACT ARMY <input type="checkbox"/> ARNG <input type="checkbox"/> USAR <input type="checkbox"/> ROTC <input type="checkbox"/> CLASSIFIED <input type="checkbox"/> FOUO <input type="checkbox"/> ACCOUNTABLE <input type="checkbox"/> SENSITIVE <input type="checkbox"/> SCHOOL REQUIREMENT									
5. TO: <small>(Include ZIP Code)</small> MCCS-IAP ATTN: Forms Clerk					6. SHIP TO: <small>(Complete address, include ZIP Code)</small> MCCS-IA ATTN: Mrs. Walker				
7. REQUIREMENTS					9. SUPPLY ACTION BY SOURCE				
LINE NO.	NUMERICAL DESIGNATION OF REQUISITIONED ITEM	UNIT <small>(Forms only)</small>	QUANTITY REQUIRED	S H I P	D O	SPECIAL ACTION <small>(See reverse side for explanation of symbols used)</small>			
<i>a</i>	<i>b</i>	<i>c</i>	<i>d</i>	<i>a</i>	<i>b</i>	<i>c</i>			
1	DA Form 17	CS	20						
2	DA Form 31	ST4	10						
3	DA Form 3955	CD	5						
4	DA Label 18-1	PTC1	25						
5	DD Form 67	CS	10						
6	DD Form 1556	ST10	15						
7	SF 63	PD100	10						
8	SF 65B	EN	40						
9	SF 71	CS	25						
10	OF 23	CD	10						
11	OF 41	PD100	6						
8. TYPED NAME AND GRADE OF COMMANDING OFFICER, ADJUTANT, PUBLICATIONS OR PROPERTY OFFICER. CLAIRE WALKER 18107					10. SHIPPED BY <input type="checkbox"/> MAIL <input type="checkbox"/> AIRMAIL <input type="checkbox"/> REGISTERED MAIL <input type="checkbox"/> OTHER <small>(Specify)</small>				
SIGNATURE					11. CARTONS <small>(Number)</small>	12. BOXES <small>(Number)</small>	13. WEIGHT	14. DATE SHIPPED	
					15. B L OR REGISTRY NUMBER(s)				
16a. EDITED BY		b. DATE		17a. FILLED BY		b. DATE			
DO NOT USE TO REQUISITION FROM USAPC'S. USE DA FORM 4569 TO REQUISITION FROM USAPC'S. THIS FORM IS FOR LOCAL USE ONLY.									

INSTRUCTIONS FOR PREPARING DA FORMS 17 AND 17-1

1. Use. DA Forms 17 and 17-1 (*Continuation Sheet*) will be used to request publications for resupply purposes on a when-needed basis.

2. Copies required. Requisitions will be submitted as follows:

- a. Original only. Unclassified publications and nonaccountable/nonsensitive blank forms.
- b. In duplicate. Classified and FOUO publications; accountable and sensitive forms; school textbook requirements including Army Extension Course materials; ROTC requirements.
- c. Assembly. When submitted in duplicate, requisitions will be assembled so that the original and duplicate copy of page 1 remain together, followed in sequence by the original and duplicate copy of each continuation sheet.

3. Completion of entries.

a. Header information.

- (1) Number of pages. Enter total number of pages in the complete requisition.
- (2) Date of requisition. Enter current date.
- (3) Account number. Enter assigned account number, if applicable.
- (4) Requisition number. Leave blank.
- (5) Name of requisitioning agency. Self-explanatory. Leave blank if same as "ship to" address (*item 6*).

b. Item 1. Check either "regular" or "special". Special requisitions will be submitted only when normal resupply action (*requisition turnaround time*) will not satisfy the need for the requisitioned items.

c. Item 2. Use only if "special" is checked in item 1. Complete justification for special handling must be furnished.

d. Item 3. Use only when requisition is marked "special." Enter date (*written as the Julian date*) when items are required.

e. Item 4. Check appropriate block if applicable.

f. Item 5. Enter the proper post stockroom stocking the items being requested.

g. Self-explanatory.

h. Item 7. Group each category of publications or blank forms together, such as Army Regulations, DA Pamphlets, Field Manuals, DA Forms, DD Forms, etc. List items in numerical sequence within each category, for example, AR 10-5, AR 310-25, AR 380-5. Use a separate line for each item.

(1) Column a. List line item number starting with 1 in sequence regardless of category.

(2) Column b. Enter numerical designation (*or title if unnumbered*) of the item. Items will be ordered as follows:

- AR 10-1 (*when only the basic publication is desired*)
- AR 10-1 and changes (*when a basic publication including all current changes is desired*)
- AR 10-1, C1 (*when a specific change(s) only is desired*)

(3) Column c. For forms only, enter the unit of issue, such as "pad", "set", "sheet", etc. Units of issue are shown in DA Pamphlet 310-2.

(4) Column d. Enter the quantity needed of the item.

i. Item 8. Self-explanatory.

Items number 9 through 17 are provided for use by sources of supply for publications and blank forms. The following annotations will be used as advice of supply action accorded requisitions submitted thereto:

Item 9-

Column a - Items partially or completely shipped will be indicated by a check mark in this column. If partial shipment is made, actual quantity shipped will be indicated in Column c, "Other Action."

Column b - Items partially or completely unavailable which are established as dues-out will be indicated by a check mark in this column. Such items will not be rerequisitioned because the source of supply will automatically furnish these items when stock is available. Such items may be rerequisitioned if additional quantities are required.

Column c - Items cancelled will be indicated in this column, the following symbols may be used:

C1 - Item cannot be identified. Furnish copy of item or refer to directive governing its use.

OBS - Item has been declared obsolete, rescinded, superseded or suspended. (*Further clarification will be shown under Column c, "Other Action."*)

UR - Item under revision - no stocks available. Initial distribution or notice of availability will be made.

NYP - Item is new - not yet available. Initial distribution or notice of availability will be made.

ID - Initial distribution has been made, is being made or will be made in near future. (*ID dates will be shown in Column c, "Other Action."*)

NS - Item not stocked and source of supply not shown. If known, source of supply will be shown in Column c, "Other Action."

NR - Supply of item is exhausted and item will not be reprinted.

2

REQUISITION FOR PUBLICATIONS AND BLANK FORMS <small>For use of this form, see AR 25-30; the proponent agency is ODISC4</small>				PAGE <u>1</u> OF <u>1</u> PAGES	DATE OF REQUISITION 1 Dec 95	REQUISITION NUMBER <small>(Assigned by Supply Source)</small>					
NAME OF REQUISITIONING AGENCY IF DIFFERENT FROM 'SHIP TO' ADDRESS					ACCOUNT NO.						
1. TYPE OF REQUISITION <input checked="" type="checkbox"/> REGULAR <input type="checkbox"/> SPECIAL		2. JUSTIFICATION FOR SPECIAL REQUISITION				3. REQUIRED DATE <small>(Use Julian date)</small>					
4. ITEMS REQUESTED HEREON ARE <input type="checkbox"/> FOUO <input type="checkbox"/> ACCOUNTABLE <input type="checkbox"/> SENSITIVE <input checked="" type="checkbox"/> ACT ARMY <input type="checkbox"/> ARNG <input type="checkbox"/> USAR <input type="checkbox"/> ROTC <input type="checkbox"/> CLASSIFIED <input type="checkbox"/> SCHOOL REQUIREMENT											
5. TO: <small>(Include ZIP Code)</small> MCCS-IAP ATTN: Pubs Clerk				6. SHIP TO: <small>(Complete address, include ZIP Code)</small> MCCS-IA ATTN: Mrs. Walker							
7. REQUIREMENTS				9. SUPPLY ACTION BY SOURCE							
LINE NO.	NUMERICAL DESIGNATION OF REQUISITIONED ITEM	UNIT <small>(Forms only)</small>	QUANTITY REQUIRED	S	H	I	D	O	SPECIAL ACTION <small>(See reverse side for explanation of symbols used)</small>		
<i>a</i>	<i>b</i>	<i>c</i>	<i>d</i>	<i>a</i>	<i>b</i>				<i>c</i>		
1	AMEDDC&S Reg 25-1	EA	1								
2	AMEDDC&S Memo 25-50	EA	2								
3	AMEDDC&S Pam 25-31	EA	5								
4	AMEDDC&S Suppl 1 to AR 340-9	EA	10								
5	AMEDDC&S Cir 350-3	EA	2								
8. TYPED NAME AND GRADE OF COMMANDING OFFICER, ADJUTANT, PUBLICATIONS OR PROPERTY OFFICER. Mrs. Claire Walker 18107				10. SHIPPED BY <input type="checkbox"/> MAIL <input type="checkbox"/> AIRMAIL <input type="checkbox"/> REGISTERED MAIL <input type="checkbox"/> OTHER <small>(Specify)</small>							
SIGNATURE				11. CARTONS <small>(Number)</small>		12. BOXES <small>(Number)</small>		13. WEIGHT		14. DATE SHIPPED	
				15. B L OR REGISTRY NUMBER(s)				16a. EDITED BY		b. DATE	
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 - c. Assembly. When submitted in duplicate, requisitions will be assembled so that the original and duplicate copy of page 1 remain together, followed in sequence by the original and duplicate copy of each continuation sheet.
3. Completion of entries.
 - a. Header information.
 - (1) Number of pages. Enter total number of pages in the complete requisition.
 - (2) Date of requisition. Enter current date.
 - (3) Account number. Enter assigned account number, if applicable.
 - (4) Requisition number. Leave blank.
 - (5) Name of requisitioning agency. Self-explanatory. Leave blank if same as "ship to" address (*item 6*).
 - b. Item 1. Check either "regular" or "special". Special requisitions will be submitted only when normal resupply action (*requisition turnaround time*) will not satisfy the need for the requisitioned items.

- c. Item 2. Use only if "special" is checked in item 1. Complete justification for special handling must be furnished.
- d. Item 3. Use only when requisition is marked "special." Enter date (*written as the Julian date*) when items are required.
- e. Item 4. Check appropriate block if applicable.
- f. Item 5. Enter the proper post stockroom stocking the items being requested.
- g. Self-explanatory.
- h. Item 7. Group each category of publications or blank forms together, such as Army Regulations, DA Pamphlets, Field Manuals, DA Forms, DD Forms, etc. List items in numerical sequence within each category, for example, AR 10-5, AR 310-25, AR 380-5. Use a separate line for each item.
 - (1) Column a. List line item number starting with 1 in sequence regardless of category.
 - (2) Column b. Enter numerical designation (*or title if unnumbered*) of the item. Items will be ordered as follows:
 - AR 10-1 (*when only the basic publication is desired*)
 - AR 10-1 and changes (*when a basic publication including all current changes is desired*)
 - AR 10-1, C1 (*when a specific change(s) only is desired*)
 - (3) Column c. For forms only, enter the unit of issue, such as "pad", "set", "sheet", etc. Units of issue are shown in DA Pamphlet 310-2.
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- i. Item 8. Self-explanatory.

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Column c - Items cancelled will be indicated in this column, the following symbols may be used:

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OBS - Item has been declared obsolete, rescinded, superseded or suspended. (*Further clarification will be shown under Column c, "Other Action."*)

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ID - Initial distribution has been made, is being made or will be made in near future. (*ID dates will be shown in Column c, "Other Action."*)

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NR - Supply of item is exhausted and item will not be reprinted.

FORM PROCESSING ACTION REQUEST <i>(Read Instructions in DoD 7750.7-M before completing this form)</i>		1. TYPE SUBMISSION <i>(X one)</i>			2. FORM DESIGNATION AND NUMBER <i>(Leave blank if a new form)</i>		3. DATE OF FORM <i>(Complete only when cancelling a form)</i>				
		<input checked="" type="checkbox"/> NEW	OTHER <i>(Specify)</i>								
		<input type="checkbox"/> REVISION									
		<input type="checkbox"/> CANCELLATION									
4. FROM <i>(DoD Component OPR Organization and complete mailing address)</i> (your office symbol)			5. THRU <i>(DoD Component FMO Organization and complete mailing address)</i> AHS departments enter MCCS-H			6. TO <i>(Organization and complete mailing address)</i> MCCS-IAA					
7. FORM TITLE Enter the title of your proposed form					8. SUPERSEDED FORMS <i>(If applicable)</i>						
					a. FORM NUMBER		b. EDITION DATE		c. DISPOSITION <i>(X one)</i>		
9. PRESCRIBING DOCUMENT NUMBER <i>(Attach copy)</i> AMEDDC&S Publ or SOP		10. FUNCTIONAL CODE <i>(Leave blank if a new form)</i>		11. TYPE OF FORM <i>(X one)</i> <input checked="" type="checkbox"/> PRESCRIBED <input type="checkbox"/> ADOPTED		if applicable		date of			
						old form					
12. DESIGN CONSIDERATIONS											
a. SUGGESTED SIZE <i>(Width) (Length)</i> 8 1/2 11"		b. SPECIAL CONSTRUCTION REQUIRED? <i>(X one)</i> YES <i>(If Yes, attach printing specifications)</i> NO <input checked="" type="checkbox"/>		c. IS FORM CLASSIFIED? <i>(X as applicable)</i> WHEN BLANK? <input checked="" type="checkbox"/> NO WHEN FILLED IN? <input type="checkbox"/>		d. IS FORM CONTROLLED? <i>(X as applicable)</i> SAFEGUARD <input checked="" type="checkbox"/> NO SERIALLY NUMBERED <input type="checkbox"/>		e. IS FORM AUTHORIZED FOR ELECTRONIC GENERATION? <i>(X one)</i> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> WITH STIPULATIONS			
13. PURPOSE AND DESCRIPTION OF USE <i>(Attach additional sheet, if necessary)</i> To monitor student progress during...blah, blah, blah... Form may be generated electronically provided all the provisions of the prescribing directive are met. Initial Distribution: 2400, place in stock for requisition orders.											
14. INTERNAL COORDINATION AND CONCURRENCE											
(1) COORDINATOR					(2) APPLICABLE <i>(Yes or No)</i>		(3) REMARKS <i>(Enter Reports Control Number(s) and expiration date(s), if applicable)</i>				
		NAME		INITIALS	OFFICE SYMBOL	TELEPHONE NUMBER <i>(Include DSN/Area Code)</i>					
a. PRIVACY ACT		MS. SHULL			MCCS-IAR	221-0000					
b. POSTAL											
c. DATA ELEMENTS											
d. REPORTS											
INTERAGENCY		NA									
RCS											
OMB											
15. EXTERNAL COORDINATION AND CONCURRENCE <i>(Not required for OSD, DoD Component, or Command forms)</i>											
a. DOD COMPONENT		b. COORDINATOR				c. ESTIMATED ANNUAL USAGE		d. IF REVISION, QTY EXISTING FORMS ON HAND			
		NAME		INITIALS	OFFICE SYMBOL	TELEPHONE NUMBER <i>(Include DSN/Area Code)</i>					
ACTIVITY		LTC I. SAWBONES			MCCS-	221-0000		800 2400			
ACTIVITY		MAJ T. BONIS			MCCS-	221-0001					
ACTIVITY		CSM I.C. EWE			MCCS-	221-0002					
CERTIFICATION OF DOD COMPONENT OPR AND/OR ACTION OFFICER, APPROVING OFFICIAL, AND FMO I hereby certify that all of the above coordinations have been completed as indicated.											
16. DOD COMPONENT OPR AND/OR ACTION OFFICER											
a. TYPED NAME				b. SIGNATURE			c. TELEPHONE NO.				
SFC I.B. WORKER							221-0003				
17. DOD COMPONENT APPROVING OFFICIAL					18. DOD COMPONENT AND/OR COMMAND FORMS MANAGEMENT OFFICER						
a. SIGNATURE			b. DATE SIGNED		a. SIGNATURE			b. DATE SIGNED			
MS. I. DUDAT					NA						
19. APPROVING FORMS MANAGEMENT OFFICER											
a. TYPED NAME				b. SIGNATURE			c. DATE SIGNED				
NA											

20. CLASS OF FORM									21. RELATED FORMS				22. CONSTRUCTION				
DA	DD	EGA	LRA	SF	OF	OTH	COMM	LOCAL					CS	MULTI-PAGE	TAG	LABEL	
								X					X				
													SET	SET CONT.	PAD	OTHER	
23. DESIGN CONSIDERATIONS									24. DISTRIBUTION OR DELIVERY <i>(Include complete address for Stock and Issue (S&I))</i>								
a. HOW WILL FORM BE FILLED IN? <i>(x all that apply)</i>					b. TYPE FILE <i>(x all that apply)</i>				<input type="checkbox"/> APDC, BALTIMORE <input type="checkbox"/> APDC, ST. LOUIS <input type="checkbox"/> EGA <input type="checkbox"/> LRA <input type="checkbox"/> S&I 25. REIMBURSABLE ORDER NO.								
<input checked="" type="checkbox"/> MANUALLY					<input type="checkbox"/> BINDER												
<input checked="" type="checkbox"/> TYPEWRITER					<input type="checkbox"/> FASTENER												
AUTOMATED EQUIP. <i>(Describe in Item 13)</i>					<input type="checkbox"/> CARD <input type="checkbox"/> VISIBLE												

26. If this is a revision to an existing form, does it require a change to the prescribing directive? <i>(Attach copy)</i> YES <input type="checkbox"/> NO <input type="checkbox"/>					27. This form complies with the neutral language requirement? YES <input type="checkbox"/> NO <input type="checkbox"/> NA <input type="checkbox"/>				
---	--	--	--	--	--	--	--	--	--

28. FOR USE BY FORMS APPROVING AGENCY *(Must correspond with item 22.)*

a. PAPER					b. PRINT				
COPY NO. <i>(1)</i>	BASIS WEIGHT <i>(2)</i>	TYPE <i>(3)</i>	COLOR <i>(4)</i>	COLOR INK <i>(1)</i>	FACE ONLY <i>(2)</i>	<i>(3)</i> HEAD TO			
						HEAD	FOOT	LEFT	RIGHT

c. SIZE <i>(width-length)</i>		d. UNIT OF ISSUE <i>(cut sheet, pad, tag, etc.)</i>	e. NO. OF ORIGINALS	f. ASSEMBLING		g. BINDING	
<i>(1)</i> OVERALL	<i>(2)</i> FOLDED			<i>(1)</i> SHEETS IN SETS	<i>(2)</i> SHEETS IN PADS	<i>(1)</i> TYPE	<i>(2)</i> POSITION
X	X						

h. PUNCHING					i. PRENUMBERING		j. MARGINS	
<i>(1)</i> NO. HOLES	<i>(2)</i> DIAMETER	<i>(3)</i> C TO C	<i>(4)</i> HOLE	<i>(5)</i> POSITION	<i>(1)</i> FROM <i>(and including)</i>	<i>(2)</i> TO <i>(and including)</i>	<i>(1)</i> FRONT	<i>(2)</i> BACK
							<i>(a)</i> TOP	
							<i>(b)</i> LEFT	

29. ADDITIONAL SPECIFICATIONS

30. FORMS APPROVING AGENCY					31. FORMS REGISTER NUMBER			
a. SIGNATURE					b. DATE			

INSTRUCTIONS FOR COMPLETION OF SIGNATURE BLOCKS

DD Form 67 is to be used for processing Standard, Optional, other Government Agency, DD, DA, and command/local forms. The following is guidance for use of the signature blocks at the different Army echelons.

BLOCK 16 -- Enter the name of the proponent or an individual who can provide technical information about the purpose and use of the form, do NOT enter the name of the Army FMO.

BLOCK 17 -- This individual must be at the division/directorate level or above for DD or DA forms and is normally the approving official for the respective prescribing publication for the form.

BLOCK 18 -- For DD forms, Standard Forms, and Optional Forms, this block will be signed at USAPPC. For DA and other Government Agency forms, this block will be signed by the proponent organization FMO. Leave blank for command, agency, and local forms.

BLOCK 19 -- Leave blank on all DD forms processing requests. For DA and other Government Agency forms, this block will be signed at USAPPC. For command forms, the respective FMO serves as the approving authority.

BLOCK 30 -- For Standard, Optional, and DD forms, this block is used by USAPPC for approving printing specifications.

FORM PROCESSING ACTION REQUEST <i>(Read Instructions in DoD 7750.7-M before completing this form)</i>		1. TYPE SUBMISSION <i>(X one)</i>		2. FORM DESIGNATION AND NUMBER <i>(Leave blank if a new form)</i>		3. DATE OF FORM <i>(Complete only when cancelling a form)</i>		
		<input checked="" type="checkbox"/> NEW	OTHER <i>(Specify)</i>		AMEDDC&S Form		1 AUG 95	
		<input type="checkbox"/> REVISION			1074			
4. FROM <i>(DoD Component OPR Organization and complete mailing address)</i>		5. THRU <i>(DoD Component FMO Organization and complete mailing address)</i>		6. TO <i>(Organization and complete mailing address)</i>				
MCCS-IA ASD, IMD AMEDDC&S				MCCS-IA (Forms Mgr) ASD, IMD AMEDDC&S				
7. FORM TITLE				8. SUPERSEDED FORMS <i>(If applicable)</i>				
Customer Satisfaction Report				a. FORM NUMBER		b. EDITION DATE	c. DISPOSITION <i>(X one)</i>	
9. PRESCRIBING DOCUMENT NUMBER <i>(Attach copy)</i>		10. FUNCTIONAL CODE <i>(Leave blank if a new form)</i>	11. TYPE OF FORM <i>(X one)</i>		(1) USE	(2) DO NOT USE		
AMEDDC&S Pam 25-33			<input checked="" type="checkbox"/> PRESCRIBED					
				<input type="checkbox"/> ADOPTED				
12. DESIGN CONSIDERATIONS								
a. SUGGESTED SIZE <i>(Width) (Length)</i>		b. SPECIAL CONSTRUCTION REQUIRED <i>(X one)</i>		c. IS FORM CLASSIFIED? <i>(X as applicable)</i>		d. IS FORM CONTROLLED? <i>(X as applicable)</i>		
8.5 11		<input checked="" type="checkbox"/> YES <i>(If yes, attach printing specifications)</i> <input type="checkbox"/> NO		WHEN BLANK? <input checked="" type="checkbox"/> NO WHEN FILLED IN? <input type="checkbox"/>		SAFEGUARD <input checked="" type="checkbox"/> NO SERIALLY NUMBERED <input type="checkbox"/>		
e. IS FORM AUTHORIZED FOR ELECTRONIC GENERATION? <i>(X one)</i>								
<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO WITH STIPULATIONS								
13. PURPOSE AND DESCRIPTION OF USE <i>(Attach additional sheet, if necessary)</i>								
To solicit comments in order to strive for the best possible customer service IMD can provide. Initial distribution: 2,400 place in stock for requisition orders. Expected usage factor: 200 a month.								
14. INTERNAL COORDINATION AND CONCURRENCE								
(1) COORDINATOR				(2) APPLICABLE <i>(Yes or No)</i>		(3) REMARKS <i>(Enter Reports Control Number(s) and expiration date(s), if applicable)</i>		
	NAME	INITIALS	OFFICE SYMBOL	TELEPHONE NUMBER <i>(Include DSN/Area Code)</i>				
a. PRIVACY ACT								
b. POSTAL								
c. DATA ELEMENTS								
d. REPORTS								
INTERAGENCY								
RCS								
OMB								
15. EXTERNAL COORDINATION AND CONCURRENCE <i>(Not required for S, DoD Component, or Command forms)</i>								
a. DOD COMPONENT		b. COORDINATOR			c. ESTIMATED ANNUAL USAGE		d. IF REVISION, QTY EXISTING FORMS ON HAND	
		NAME	INITIALS	OFFICE SYMBOL	TELEPHONE NUMBER <i>(Include DSN/Area Code)</i>			
CERTIFICATION OF DOD COMPONENT OPR AND/OR ACTION OFFICER, APPROVING OFFICIAL, AND FMO I hereby certify that all of the above coordinations have been completed as indicated.								
16. DOD COMPONENT OPR AND/OR ACTION OFFICER								
a. TYPED NAME		b. SIGNATURE			c. TELEPHONE NO.			
PAUL D. ANDERSON, CPT, MS		<i>Paul D. Anderson</i>			221-8107/8084			
17. DOD COMPONENT APPROVING OFFICIAL				18. DOD COMPONENT AND/OR COMMAND FORMS MANAGEMENT OFFICER				
a. SIGNATURE		b. DATE SIGNED		a. SIGNATURE		b. DATE SIGNED		
<i>Paul D. Anderson</i>				<i>Paul D. Anderson</i>				
19. APPROVING FORMS MANAGEMENT OFFICER								
a. TYPED NAME		b. SIGNATURE			c. DATE SIGNED			
LYDIA GUERRERO		<i>Lydia Guerrero</i>			15 Sep 95			

SAMPLE

20. CLASS OF FORM									21. RELATED FORMS				22. CONSTRUCTION			
DA	DD	EGA	LRA	SF	OF	OTH	COMM	LOCAL					CS	MULTI-PAGE	TAG	LABEL
								X					X			
													SET	SET CONT.	PAD	OTHER
23. DESIGN CONSIDERATIONS									24. DISTRIBUTION OR DELIVERY <i>(Include complete address for Stock and Issue (S&I))</i>							
a. HOW WILL FORM BE FILLED IN? <i>(x all that apply)</i>					b. TYPE FILE <i>(x all that apply)</i>				<input type="checkbox"/> APDC, BALTIMORE <input type="checkbox"/> APDC, ST. LOUIS <input type="checkbox"/> EGA <input type="checkbox"/> LRA <input type="checkbox"/> S&I							
<input checked="" type="checkbox"/> MANUALLY					<input type="checkbox"/> BINDER											
<input checked="" type="checkbox"/> TYPEWRITER					<input type="checkbox"/> FASTENER											
AUTOMATED EQUIP. <i>(Describe in Item 13)</i>					<input type="checkbox"/> CARD											
					<input type="checkbox"/> VISIBLE				25. REIMBURSABLE ORDER NO.							
26. If this is a revision to an existing form, does it require a change to the prescribing directive? <i>(Attach copy)</i> YES <input type="checkbox"/> NO <input type="checkbox"/>										27. This form complies with the neutral language requirement? YES <input type="checkbox"/> NO <input type="checkbox"/> NA <input type="checkbox"/>						
28. FOR USE BY FORMS APPROVING AGENCY <i>(Must correspond with item 22.)</i>																
a. PAPER							b. PRINT									
COPY NO. <i>(1)</i>	BASIS WEIGHT <i>(2)</i>	TYPE <i>(3)</i>			COLOR <i>(4)</i>	COLOR INK <i>(1)</i>	FACE ONLY <i>(2)</i>	<i>(3)</i> HEAD TO				HEAD	FOOT	LEFT	RIGHT	
c. SIZE <i>(width-length)</i>		d. UNIT OF ISSUE <i>(cut sheet, pad, tag, etc.)</i>		e. NO. OF ORIGINALS		f. ASSEMBLING		g. BINDING								
<i>(1) OVERALL</i>		<i>(2) FOLDED</i>				<i>(1) SHEETS IN SETS</i>		<i>(2) SHEETS IN PADS</i>		<i>(1) TYPE</i>			<i>(2) POSITION</i>			
X		X														
h. PUNCHING					i. PRENUMBERING				j. MARGINS							
<i>(1) NO. HOLES</i>	<i>(2) DIAMETER</i>	<i>(3) C TO C</i>	<i>(4) KIND</i>	<i>(5) POSITION</i>	<i>(1) FROM (and including)</i>		<i>(2) TO (and including)</i>				<i>(1) FRONT</i>		<i>(2) BACK</i>			
											<i>(a) TOP</i>					
									<i>(b) LEFT</i>							
29. ADDITIONAL SPECIFICATIONS																
30. FORMS APPROVING AGENCY										31. FORMS REGISTER NUMBER						
a. SIGNATURE								b. DATE								
INSTRUCTIONS FOR COMPLETION OF SIGNATURE BLOCKS																
DD Form 67 is to be used for processing Standard, Optional, other Government Agency, DD, DA, and command/local forms. The following is guidance for use of the signature blocks at the different Army echelons.																
BLOCK 16 -- Enter the name of the proponent or an individual who can provide technical information about the purpose and use of the form, do NOT enter the name of the Army FMO.																
BLOCK 17 -- This individual must be at the division/directorate level or above for DD or DA forms and is normally the approving official for the respective prescribing publication for the form.																
BLOCK 18 -- For DD forms, Standard Forms, and Optional Forms, this block will be signed at USAPPC. For DA and other Government Agency forms, this block will be signed by the proponent organization FMO. Leave blank for command, agency, and local forms.																
BLOCK 19 -- Leave blank on all DD forms processing requests. For DA and other Government Agency forms, this block will be signed at USAPPC. For command forms, the respective FMO serves as the approving authority.																
BLOCK 30 -- For Standard, Optional, and DD forms, this block is used by USAPPC for approving printing specifications.																

SAMPLE

APPENDIX C

INSTRUCTIONS: Walk-thru Requisition means that the student receives, signs for, and returns the publications to the **Publications Stockroom, Bldg 902**. A copy of this sheet may be used to: (1) request a publications issue, (2) request a turn-in of publications, (3) make changes to the list of publications, course advisor, or phone numbers. Publication Stockroom, 14995.

To: AMEDDC&S PUBLICATIONS STOCKROOM - BLDG 902

SUBJECT: Request for Issue/Return of Publications (Resident Students). Submit 30 to 45 days before class arrival or 7 days before turn-in.

FROM: MCCS-HH COURSE: 6-8-C20 (RC) COURSE ADVISOR: CPT Randez
 ADVISOR'S FAX NUMBER: _____*****ADVISOR PHONE NUMBER: 18156
 If the Course Advisor has a cc:Mail address, enter: _____

TODAY'S CLASS
 DATE: _____ NUMBER: _____ EST NO of STUDENTS: _____

CLASS ARRIVAL DATE: _____ THE CLASS ADVISOR MAY REQUEST AN ISSUE/RETURN DATE AND TIME BY FILLING IN THE BLANKS BELOW.

		Pubs Stk Rm
Request an issue on	at _____	Approved Y/N _____
		Pubs Stk Rm
Request for Return on	at _____	Approved Y/N _____

(NOTE: Issue/return between 0630/1030 & 1200/1500. For planning by Course Advisor, Issue: six students per min. Return: two students per min).

Reference DA Pam 25-30 for Complete Publication Title

PUBLICATION NUMBER	SHORT PUBLICATION TITLE
CMH PUB 83-3	EMERGENCY WAR SURGERY
FM 101-5-1	OPERATIONAL TERMS/SYMBOLS
FM 22-5	DRILL & CEREMONIES
STP 21-I-MQS	MQS I MANUAL OF COMMON TASKS
STP 21-II-MQS	MQS II MANUAL OF COMMON TASKS
STP 8-67II-MQS	MQS II MEDICAL SERVICE CORPS
STP 8-II-MQS	AMEDD CO GRADE OFFICER
TRADOC Pam 525-50	OPS CONCEPT HSS AIRLAND BATTLE

INSTRUCTION: Bulk requisition means that the Course Advisor keeps the publications and issues the publications to the students. Use a copy of this sheet to request changes to your publication requirements, new Course Advisor, phone number, fax number and/or order replacement publications.

FROM: MCCS-HHM and COURSE: 8B-F20(RC)

TO: AMEDDC&S PUBLICATIONS STOCKROOM BLDG 902 * FAX NUMBER 221-3806

SUBJECT: BULK REQUISITION OF RESIDENT STUDENT PUBLICATIONS

Note: In accordance with AR 25-30, Chap 12, Section V, para 12-23a, Residents students will not keep DA publications when courses are completed. Publications will be turned in for subsequent issue to new students.

TODAY'S DATE: _____ COURSE ADVISOR: CPT Shull PHONE: 18027
COURSE ADVISOR'S FAX NUMBER: 19842 AND/OR CC MAIL ADDRESS: _____.

PUBLICATION NUMBER	OFFICIAL SHORT NAME	NUMBER OF REPLACEMENT COPIES REQUESTED
AR 220-1	UNIT STATUS REPORTING	
AR 40-61	MEDICAL LOGISTICS POLICY & PRO	
AR 600-8-101	PERSONNEL PROCESSING	
FM 101-10-1/1	STAFF/ORG, TECH, LOG/ PLANNING	
FM 101-10-1/2	STAFF/ORG, TECH, LOG/ PLANNING	
SB 8-75-8	AMEDD SUPPLY INFO	
SB 8-75-S8	AMEDD SUPPLY BULLETIN	
UPDATE 2-14	UNIT SUPPLY HB	
UPDATE 3-14	MAINTENANCE MANAGEMENT HB	

APPENDIX D

FORMS REQUISITION

DA Forms 17/17-1 are due NLT COB, 1st of each month, ready on the 6th, and picked-up NLT the 9th of each month.

- | | | |
|-----|----------|--|
| 1. | MCCS-I | Information Management Directorate (IMD) |
| 2. | MCCS-IA | Administrative Services Division (ASD),
IMD |
| 3. | MCCS-FCD | Doctrine Literature Branch |
| 4. | MCCS-GSF | Safety Office |
| 5. | MCCS-HB | Administrative Support Office |
| 6. | MCCS-HPB | Behavioral Science Specialist Branch |
| 7. | MCCS-HT | Department of Training Support |
| 8. | MCCS-HTU | Unit Training Branch |
| 9. | MCCS-CD | Dental Corps |
| 10. | MCCS-A | Center Brigade |
| 11. | MCCS-AB | 187th Medical Battalion |
| 12. | MCCS-AC | 232d Medical Battalion |
| 13. | MCCS-AD | Academy Battalion |
| 14. | MCCS-HE | Department of Health, Education, and
Training |
| | MCHI-RA | Dir, Pnt Admin Systems & Biostatistics
Activity (PAS&B) |
| 16. | MCCS-HR | Ctr for Healthcare Education and Studies |

DA Forms 17/17-1 are due NLT COB 8th of each month, ready on the 13th and picked up NLT 16th of each month.

- | | | |
|-----|--------------|---|
| 17. | MCCS-Z | Office of the Commanding General |
| 18. | MCCS-GCH | Chaplain |
| 19. | MCCS-GEO/GIG | Equal Opportunity Office/I.G. |
| 20. | MCCS-GRE/GNG | USAR Advisor/ARNG |
| 21. | MCCS-HD | Department of Dental Science |
| 22. | MSSC-HRA | Health Services Admin |
| 23. | MCCS-HSN | Nonresident Instruction Branch |
| 24. | MCCS-IAW | Information Processing Branch, ASD, IMD |
| 25. | MCCS-HF | Dept of Special Operations Medical Tng |
| 26. | MCCS-FC | Directorate of Combat and Doctrine
Development |
| 27. | MCCS-GSP | Strategic Planning Office |
| 28. | MCCS-HSE | Department of Academic Support |
| 29. | MCCS-GIS | International Military Students Office |
| 30. | MCCS-FB | U.S. Army Medical Department Board |
| 31. | MCCS-GJA | Command Staff Judge Advocate |
| 32. | MCCS-GPE | Pharmacoeconomic Center |

DA Forms 17/17-1 are due NLT COB 15th of each month, ready on the 20th and picked-up NLT 23d of each month.

- | | |
|--------|--------------------------|
| MCCS-P | Directorate of Personnel |
|--------|--------------------------|

34.	MCCS-IAD	C, Admin Operations Br, ASD, IMD
35.	Open	
36.	MCCS-HM	Department of Medical Science
37.	MCCS-HN	Department of Nursing Science
38.	MCCS-HNO	Operating Room Branch
39.	MCCS-HH	Department of Healthcare Operations
40.	MCCS-HCA	Department of Clinical Support Services
41.	MCCS-HTI	Soldier Evaluation and Distributed Products Branch
42.	MCCS-IR	Plans and Management Division, IMD
43.	MCCS-L	Directorate of Logistics
44.	MCCS-IH	Health Sciences Media Division, IMD
45.	MCCS-GAM	U.S. Army Medical Museum
46.	Open	
47.	MCCS-IS	Customer Support Division, IMD
48.	MCCS-GCI	Clinical Investigation Regulatory Office

DA Forms 17/17-1 are due NLT COB 22d of each month, ready on the 27th, and picked-up NLT the 1st of each month.

49.	MCCS-R	Directorate of Resource Management
50.	MCCS-F	Assistant Commander for Force Integration
51.	MCCS-D	AMEDD Personnel Proponent Directorate
52.	MCCS-HSL	Stimson Library
53.	MCCS-HP	Department of Preventive Health Services
54.	MCCS-HV	Department of Veterinary Science
55.	MCCS-HSS	Staff and Faculty Development Branch
56.	Open	
57.	MCCS-FL	Training Management Branch
58.	Open	
59.	MCCS-FL	Battle Lab
60.	MCCS-HJ	Department of Joint Medical Readiness Tng
61.	MCCS-GPR	Executive Operations Office
62.	MCCS-GAR	AMEDD Regiment Office
63.	MCCS-N	AMEDD NCO Academy
64.	MCCS-GSI	Security and Intelligence Branch

NOTES:

1. If the suspense date falls on a weekend or holiday, the requisitions are due the last working day prior to the said date

2. Late turn-in of requisition may be obtained by contacting the AMEDDC&S forms clerk prior to scheduled turn-in date.

3. Any requisition which arrives at the AMEDDC&S forms section after the suspense date and without prior coordination for late turn-in, will be considered the regular monthly requisition for the next month.

4. Due to limited space, any requisition not picked up IAW this schedule will be placed back in stock.

(MCCS-IAP)

FOR THE COMMANDER:

OFFICIAL:

CHARLES E. DYER, II
Colonel, MS
Secretary of the General Staff



PAUL D. ANDERSON
CPT, MS
Adjutant General

DISTRIBUTION:

A, plus:

100-MCCS-H

100-MCCS-IAP

10-MCCS-N

5-MCCS-IA (Forms Mgt Off)

5-MCCS-IAD