US ARMY REPORT AND MESSAGE FORMATS

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PREFACE

FM 101-5-2 is the Army's capstone manual for standardized report and message formats. It provides a standard, readily available reference from which soldiers as well as automation designers can extract report and message templates. FM 101-5-2 is a compendium of formats commonly used by tactical units from small unit to corps and forms the baseline for reporting and communicating as command, control, and communications technology evolves. It allows a common, authoritative understanding of reporting and communicating to exist among all US Army elements. It also relates to, supports, and drives command, control, and communications doctrine and US Army interaction with the joint and multinational communications communities.

FM 101-5-2 facilitates the tailoring and task organization of US Army elements through standardization of the command, control, and communications formats units use to communicate internally. The voice-message templates contained in FM 101-5-2 provide the bridge between technologically advanced units and those not yet modernized. This is significant because, while our modernized units are among the most capable, nonmodernized units currently comprise the majority of the US Army’s active component, all of the reserve components, and the majority of our potential allies. The US Army will continue to modernize all units, but the requirement to communicate expeditiously and succinctly via voice will remain. Potential attacks on our command, control, and communications networks, equipment damage, incompatible communications systems, and equipment failures are other consequences that may require the use of voice message formats, even for modernized units.

As the US Army's doctrinal library for report and message voice templates, FM 101-5-2 is intended to prevent units from wasting time and resources designing command and control formats. Units at different locations and echelons can develop similar SOPs for report and message formats (voice and digital) that facilitate command, control, communications, computer, and intelligence (C4I) exchanges. The FM 101-5-2 formats are derived from existing Army Battle Command System (ABCS), United States Message Text Formats (USMTF), Allied Procedures Publication-9 (APP-9) formats, as well as numerous unit SOPs. These sources, especially the formats from existing unit SOPs, have been collected, discussed, and chosen as the most user-friendly, functional, and adaptable.

As a user's manual, FM 101-5-2 will drive the formatting of future ABCS report and messages, US Army input to the development of APP-9, and the USMTF message formats. Formats contained in FM 101-5-2 are the mechanism through which the US Army seeks to adapt these joint and multinational formats into a user-friendly and standardized land component message format library. Parallel formats for ABCS, APP-9 and USMTF will enable US Army units to operate in joint and multinational command structures without reconfiguring their normal mode of operation. All future digitization formats for the US Army will be based on these voice message templates. FM 101-5-2 supports the efforts of FM 100-34-1 (Tactics, Techniques, and Procedures for Command Post Operations- TBP) and is consistent with current and emerging US Army and joint doctrine.

FM 101-5-2 is directive and prescriptive. Units will use its report and message formats for all tactical communications. Units will not modify these formats unless authorized by the unit commander for critical information requirements. For Army-wide use, this manual does not
include many branch-specific or technical reports and messages. These formats are contained in field manuals published by their respective proponents. Branch-specific or technical reports complement the reports in this manual and are not considered superseded by it. However, use the formats in FM 101-5-2 whenever possible.

Headquarters, Combined Arms Center is the proponent for this publication. Send comments and recommended changes on DA Form 2028 to the Commander, US Army Combined Arms Center and Fort Leavenworth, ATTN: ATZL-SWW-D, Fort Leavenworth, KS 66027-6900.

Unless otherwise stated, masculine nouns or pronouns do not refer exclusively to men; however, reports refer to messages.
SECTION I—INSTRUCTIONS

The report and message formats in this manual are designed to ease preparation and manual transmission of written and voice reports and messages. They provide an organized template to manually record, pass, and store information. To send a formatted voice message, operators first fill in the appropriate blanks on the required message template and then read the message over the radio or telephone. The receiver, knowing the message type he is receiving, can easily record the information in the proper format. Voice messages normally are used when record traffic devices are inoperative or not available, or when the tactical situation does not allow adequate time to transmit a record message.

FM 101-5-2 enables standardization of battlefield reporting across all levels of command and throughout different types of units. Every format listed in FM 101-5-2 operates as a voice message format. Using standardized voice formats permits all units to communicate regardless of the unit’s level of modernization. It is anticipated that future digital formats will evolve from those found in FM 101-5-2.

FM 101-5-2 has three sections: Section One contains instructions on transmitting written and voice reports and messages. Section Two contains message formats. Its use is discussed below. Section Three contains cross-over indexes. These indexes list the names, numbers, and locations in this manual of reports commonly associated with selected subject areas.

Message Organization

All radio-telephone report and message formats consist of three main parts: heading, body, and conclusion. *Figure I-1* shows an example of the parts of a message. FM 24-19, Chapter 5, discusses message formatting in detail.

The *heading* is the administrative portion of the format. Its purpose is to identify the message source, destination, type, and importance. The heading contains the message addressee, originator, and precedence. It also includes the message classification, if required. (All report and message formats in FM 101-5-2 are unclassified. The unit commander or SOP determines the classification of a completed message.) The completed heading is normally included when sending a hard-copy message, as when sending by TACFAX, courier, or MCS. However, it must also be included in voice messages. *Figure I-2* gives an example of the standard US Army message heading and explains how to transmit it by voice.

The *body* contains the information the originator wants to send to the addressee. In a properly prepared message the information is in the line-by-line format established for the message type. This information exchange is the main focus of FM 101-5-2. *Figure I-3* shows an example of a message body.

The *conclusion* consists of the message authentication. An authentication is normally an alphanumeric from the unit signal operating instructions (SOI). The last line of every format in this manual is the authentication line (the conclusion) of the message. Upon receiving a complete message that is properly authenticated, the addressee indicates this with a response similar to the one in *Figure I-4*. If the originator requests an acknowledgement, the addressee replies by
transmitting the proword “WILCO,” Lines 1 and 2 of the message being acknowledged, and the proword “OUT.” If the originator requires an acknowledgement and read-back, the addressee replies by transmitting “WILCO” and repeating the lines for which the read-back is required followed by “OUT.”

How to Use This Manual

Section Two contains formats listed alphabetically by message name. The body of each format is preceded by the report’s short title (for example, SIR for Serious Incident Report), report number, and a paragraph of general instructions.

Report Formats Numbering System. Each format has a report number. Report numbers beginning with the letters A through M indicate that the origin of this message is from APP-9 or DA PAM 25-7. Report numbers beginning with Z indicate that the report was taken from a unit SOP or produced by the Combined Arms Doctrine Directorate of the US Army Command and General Staff College at Fort Leavenworth, Kansas. To maintain standardization across the US Army, do not change format numbers.

General Instructions. Instructions briefly describe the format’s use and list a reference that provides more detail. When a message is sent at a precedence higher than ROUTINE, that is noted. Message precedence is indicated in all upper case letters.
Initially the originator makes radio contact with the addressee.

“Alpha 09” THIS IS “India 86” “Over”

“INDIA 86” THIS “Alpha 09” “Over”

Once communication is established Originator responds:

“Alpha 09” THIS IS “India 86” “SPOT REPORT” OVER

This allows the addressee time to be ready to copy transmitted report or message.

“India 86” THIS IS “Alpha 09” “ROGER SEND IT” OVER

At this time the originator will send the report or message IAW with the FM 101-5-2 Formats:

**(Circle and transmit option selected IAW unit SOP)**

FLASH IMMEDIATE PRIORITY ROUTINE (Underline and transmit the precedence of this message.)

TOP SECRET SECRET CONFIDENTIAL (Underline and transmit the security classification of this message.)

“ROUTINE/ (or slash spoken) SECRET”

“LINE 1 – TIME “091500SEP 97” (Date and Time Group of Report)

“LINE 2 – UNIT “B CO 3-66AR” (Unit Making Report)

“LINE 3 – SIZE “Two groups of three” (Of observed activity)

“LINE 4 – ACTIVITY “Moving north to south in wedge formation” (Observed unit activity)

“LINE 5 – LOCATION “A(alpha)R(Romeo)121989” (Location of Unit Observed, if Necessary Reporting Unit Location)

“LINE 6 – UNIT “Two Enemy Tank Platoons unknown” (Enemy Unit)

“LINE 7 – TIME “091445 SEP 97” (Time of Observation)

“LINE 8 – EQUIPMENT “Enemy tank platoon had snorkel device mounted” (Equipment of Unit Observed)

“LINE 9 – SENDERS ASSESSMENT “Enemy CRP attempting to locate a ford site across cowhouse creek vic CP 09” (Why)

“LINE 10 – NARRATIVE “Have begun to initiate fire support” (Free Text for Additional Information Required for Clarification of Report)

“LINE 11 – AUTHENTICATION “JWA” (Report Authentication)

“OVER”

“India 86 THIS Alpha 09 Acknowledged OUT”
**Line Number And Name.** Each format lists the information the report is used to transmit by line number, line name, and a description of the type of information.

- When sending voice messages, the line number is normally transmitted. The line name is not transmitted unless the name itself is necessary information. For example, Line 3 of an Acknowledge message (AKNLGD) is the message type and is therefore transmitted. Lines 2 and 3 of an Acknowledge message would sound like this when sent by voice (over a secure net): “Line 2, 2-39 FA; Line 3, Acknowledge.”

- When standard information is associated with a line, it is placed in the right column of the format in upper-case letters. For example, the standard entries for line 6 of an Acknowledge message are ACKNOWLEDGE and WILCO.

- When a line requires detailed instructions, two asterisks precede the instructions (**). When transmitting information on one line makes the following line redundant, the word “(OR)” is placed between the lines. Do not transmit redundant lines.

- Each format contains lines that require some of the information discussed below. Follow these instructions when preparing messages requiring transmission of these types of information.

**Date and Time Group (DTG).** The DTG line of a message identifies the message origination time. Additionally, many report and message formats require DTG for additional information. Regardless of where the DTG is used within a report or message, it is expressed as DDHHMM(X) MMMYY where-

- DD indicates the day of the month.
- HH indicates the hour of the day, using the 24-hour clock.
- MM indicates the minutes within the hour.
- X indicates the alphabetic character that denotes the time zone. In written messages, the time zone is followed by a space. The time zone indicator will be local time zone unless specified in the unit’s operation order or in the FM 101-5-2 format. As an example, DD 1972, Joint Attack Air Request, requires that times be sent as Greenwich Mean, or “zulu” time, which is indicated with the letter Z.
- MMM indicates the first three letters of the month of the year. In written messages, all letters are in upper case.
- YY indicates the last two digits of the year.
- For example, 3 PM local time on 9 September 1997 would be expressed as “091500(L) SEP 97.” In a voice message it would be said: “Zero niner one five hundred lima (or local) September niner-seven.”
Units. The first line of a format requiring an entry for “unit” is to identify the unit making
the report. Occasionally, a subunit line is also provided for reporting information from or about
subunits. Unit SOPs dictate the format for the unit name; for example, call sign.

Locations. Use the Military Grid Reference System (MGRS) to express all locations unless
the format specifies a different coordinate system such as latitude and longitude (LAT/LONG) or
Universal Transverse Mercator (UTM). A complete MGRS location includes a longitudinal zone
designated by a number (for example, 32), a latitudinal band designated by a letter (for example,
T), a 100,000 meter grid square designated by two letters (for example AR), and a grid coordinate
designated by digits. The UTM Grid Zone Designator consists of the longitudinal zone and
latitudinal band (for example, 32T). The MGRS Grid Zone Designator is the two-letter 100,000
meter designator (for example, AR). (See FM 21-26 for further details on MGRS.)

Send all locations as six-digit grids preceded by the 100,000 meter grid square designator,
for example “AR121989” unless instructions state otherwise. To avoid confusion do not transmit
the zone and band indicators unless requested or required in the message format. If requestors
require locations expressed to a greater precession than a six-digit coordinate, they must specify
the required detail prior to the information exchange.

Addition or Deletion of Line Numbers. Originators of voice messages complete only those
lines required to pass the essential information, omitting lines that contain no information unless a
negative report is necessary. Units may add lines or repeat lines to complete their information
requirements. While actual message transmissions may vary slightly from the format in this
manual, do not delete lines from formats when reproducing them in unit SOPs to maintain
standardization across the US Army.
VOICE MESSAGE TEMPLATE MESSAGE NUMBER: F541
TITLE: SPOT REPORT [SPTRPT]

Initially the originator makes radio contact with the addressee.Italicized words demonstrate how to speak a template over the radio.

“Alpha 09 THIS IS India 86 Over”

“India 86 THIS IS Alpha 09 Over”

Once communication is established, the Originator responds:

“Alpha 09 THIS IS India 86 __________________ SPOT REPORT... OVER”
addressee originator

This allows the addressee time to copy a transmitted report or message.

“India 86 THIS IS Alpha 09 ROGER SEND IT...OVER”
originator addressee

“Alpha 09 THIS IS India 86”
addressee originator

**(Circle and transmit option selected IAW unit SOP)**

FLASH IMMEDIATE PRIORITY ROUTINE
(Underline and transmit the precedence of this message.)

TOP SECRET SECRET CONFIDENTIAL
(Underline and transmit the security classification of this message.)

“ROUTINE/SECRET” (the slash is spoken)

Figure I-2. Example of Message Heading
“LINE 1 – DATE AND TIME: 091500SEP 97” (DTG)

“LINE 2 – UNIT: B CO 3-66 AR” (Unit Making Report)

“LINE 3 – SIZE: Two groups of three” (Of Observed Activity)

“LINE 4 – ACTIVITY: Moving north to south in wedge formation” (Observed Unit Activity)

“LINE 5 – LOCATION: A(alpha)R(Romeo)121989” (MGRS or Six-Digit Grid Coordinate With Grid Zone Designator)

“LINE 6 – UNIT: Two Enemy Tank Platoons unknown” (Enemy Unit)

“LINE 7 – TIME : 091445 SEP 97” (Time of Observation)

“LINE 8 – EQUIPMENT: Enemy tank platoon had snorkel device mounted” (Equipment of Unit Observed)

“LINE 9 – SENDERS ASSESSMENT: Enemy CRP attempting to locate ford site across Cowhouse Creek vic CP 09” (Why)

“LINE 10 – NARRATIVE: Have begun engaging with indirect fires” (Free Text for Additional Information Required for Clarification of Report)

“LINE 11 – AUTHENTICATION: JWA OVER” (Report Authentication)

Figure I-3. Sample Message Body

“India 86 THIS IS Alpha 09. Acknowledged. OUT”

Figure I-4. Sample Message Conclusion
SECTION II—VOICE MESSAGE TEMPLATE FORMATS

TITLE: ACCIDENT REPORT/SERIOUS INCIDENT REPORT [SIR]
REPORT NUMBER: A001

GENERAL INSTRUCTIONS: Use to convey flash traffic to the commander and command post relating to an accident or serious incident within the command. Use FLASH precedence on CMD nets. For all other stipulations and instructions refer to AR 190-40 (SIR) and AR 385-40 (Accident Report).

LINE 1 – DATE AND TIME __________________________________ (DTG of Report)
LINE 2 – UNIT _____________________________________________ (Unit Making Report)
LINE 3 – CATEGORY _______________________________________ (Category 1 or 2)
LINE 4 – TYPE___________________________________________ (Type of Incident)
LINE 5 – TIME OF INCIDENT ________________________________ (DTG of Incident)
WEEK END/HOLIDAY ______________________________________ (Indicate YES or NO and Include Holiday Name)
LINE 6 – LOCATION________________________________________ (UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator)
LINE 7 – PERSONNEL ______________________________________ (Personnel Involved)

a. (SUBJECT)
   (1)________________________(Name, Injury, Fatality)
   (2)________________________(Pay Grade)
   (3)________________________(SSN)
   (4)________________________(Race)
   (5)________________________(Sex)
   (6)________________________(Age)
   (7)________________________(Position (CDR, PSG, Gunner))
   (8)________________________(Security Clearance)
   (9)________________________(Unit, Station, and MACOM Assigned)
   (10)_______________________(Duty Status (Leave))

b. (VICTIM)
   (1)________________________(Name, Injury, Fatality)
   (2)________________________(Pay Grade)
   (3)________________________(SSN)

**Continued on next page.**
TITLE: ACCIDENT REPORT/SERIOUS INCIDENT REPORT [SIR] (CONTINUED)

REPORT NUMBER: A001

(4)________________________(Race)
(5)________________________(Sex)
(6)________________________(Age)
(7)________________________(Position (CDR, PSG, Gunner))
(8)________________________(Security Clearance)
(9)________________________(Unit, Station, and MACOM Assigned)
(10)_______________________(Duty Status (Leave))

**Repeat lines 7a (1-10) through 7b (1-10) up to four times to transmit multiple data sets. Assign sequential line numbers to succeeding iterations; for example, first iteration a (1) through a (10) or b (1) through b (10); second iteration a (11) through a (20) or b (11) through b (20); third iteration a (21) through a (30) or b (21) through b (30); fourth iteration a (31) through a (40) or b (31) through b (40).

LINE 8 – SUMMARY _______________________________________ (Summary of Incident)
LINE 9 – PUBLICITY _______________________________________ (Adverse or Anticipated Publicity)
LINE 10 – COMMANDER____________________________________ (Commander Reporting)
LINE 11 – POC___________________________________________ (Unit POC/Duty Position)
LINE 12 – DOWNGRADE____________________________________ (Downgrading Instructions)
LINE 13 – NARRATIVE _____________________________________ (Free Text for Additional Information Required for Clarification of Report)
LINE 14 – AUTHENTICATION _______________________________ (Report Authentication)

ACCIDENT SUPPLEMENT (GROUND (GRND)/AIRCRAFT (AC))

LINE 14A –POC ____________________________________________ (E-mail, Phone, DSN)
LINE 14B –MACOM ________________________________________ (TRADOC, FORSCOM, USAREUR)
LINE 14C – ACCIDENT CLASS______________________________ (GRND/AC—A or B AC—C)
LINE 14D –WEATHER ______________________________________ (Visibility, Light Level, Precipitation, Wind)

**Continued on next page.
TITLE: ACCIDENT REPORT/SERIOUS INCIDENT REPORT [SIR] (CONTINUED)
REPORT NUMBER: A001

ACCIDENT SUPPLEMENT (GROUND (GRND)/AIRCRAFT (AC)) (CONTINUED)

LINE 14E – NIGHT VISION DEVICE __________________________ (Yes, Type, Nomenclature. For Example, NVG-AN/PVS-5, Abrams Thermal Viewer, No)

LINE 14F – MILITARY INSTALLATION ________________________ (Nearest Site)

LINE 14G – EXPLOSIVE, HAZARDOUS MATERIAL ______________ (Involved: Yes or No, Secured: Yes or No)

LINE 14H – ACCIDENT SITE SECURED IAW AR 385-40 _________ (Yes or No)

LINE 14I – ACCIDENT SITE DISTURBED ______________________ (Yes or No)

LINE 14J – PHOTOS OF DISTURBING SCENE _________________ (Yes or No)

LINE 14K – FLIGHT DATA RECORDER INSTALLED ____________ (Yes or No)

LINE 14L – LOCAL ACCIDENT INVESTIGATION BOARD APPT __ (Yes or No)

LINE 14M – NEAREST AIRFIELD ____________________________ (4000 Ft. Min. Runway)

LINE 14N – NEAREST COMMERCIAL AIRFIELD _______________ (Name, Town, State)

LINE 14O – TYPE OF EQUIPMENT ___________________________ (M1 Abrams, AH64, 30KW, Gen)

LINE 14P – AC SERIAL NUMBER ____________________________ (Serial, Tail Number)

LINE 14Q – TYPE MISSION________________________________ (Training, Svc, Single Ship, Multi Ship)

LINE 14R – NAP OF THE EARTH _____________________________ (Yes or No)

LINE 14S – FLIGHT RULES_______________________________ (VFR/IFR)
### WORKSHEET FOR
TELEPHONIC NOTIFICATION OF AVIATION ACCIDENT / INCIDENT

For use of this form, see AR 385-40: the proponent agency is OCSA

<table>
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<th>SHADED BLOCKS ARE FOR USASC USE ONLY</th>
<th>A. ASMIS CASE NUMBER</th>
<th>B. TIME &amp; DATE OPERATIONS RECEIVED REPORT</th>
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<tbody>
<tr>
<td></td>
<td></td>
<td>a. Year</td>
</tr>
</tbody>
</table>

**NOTE:** ITEMS 24 AND 25 ARE NOT REQUIRED FOR CLASS C ACCIDENT

1. **POINT OF CONTACT FOR ACCIDENT INFORMATION**
   - a. Name: John Jones

2. **ACCIDENT CLASSIFICATION**
   - a. Year: 98
   - b. Month: Jun
   - c. Day: 15

3. **TIME & DATE OF ACCIDENT**
   - a. Time (local): 4:00 PM

4. **AIRCRAFT SERIAL NUMBER**
   - 5

5. **TYPE OF AIRCRAFT**
   - UH 1

6. **PERIOD OF DAY**
   - a. Dawn
   - b. Day
   - c. Night

7. **MISSION BEING PERFORMED**
   - a. Type (Training, Svc, etc.):
     - Training
   - b. Operation:
     - Single-Ship
     - Multi-Ship

8. **NOE**
   - Yes

9. **NIGHT VISION DEVICE**
   - a. In Use:
     - Yes
   - b. If Yes:
     - ANVIS
     - FLIR

10. **UNIT OWNING AIRCRAFT**
    - 4-44 AV Bn, 21 AR Div

11. **MACOM**
    - IV Corps

12. **MILITARY INSTALLATION NEAREST ACCIDENT SITE**
    - Camp Sherman, MO

13. **EXACT ACCIDENT LOCATION**
    - VS15962847

14. **EXPLOSIVE/HAZARDOUS/SENSITIVE MATERIALS INVOLVED?**
    - X

15. **IF YES TO #14, ARE THEY SECURE?**
    - X

16. **ACCIDENT SITE SECURED IAW DA PAM385-40?**
    - X

17. **HAS ACCIDENT SITE BEEN DISTURBED?**
    - X

18. **IF YES TO #16, WERE PHOTOS, ETC. MADE BEFORE DISTURBING THE SCENE?**
    - X

19. **FLIGHT DATA RECORDER INSTALLED?**
    - X

20. **CLEARANCE WAS:**
    - a. VFR
    - b. IFR

21. **PERSONNEL INVOLVED**
    - a. No. of Personnel by Rank/Category:
      - 1 Officer
      - 1 WO
      - 1 Enlisted
      - 1 Army Civilian
      - 1 Non-Army Civilian

22. **INJURIES**
    - a. Fatalities
    - b. Non-Fatal Injuries

23. **ACCIDENT SYNOPSIS (What Happened)**
   - While on a training mission, the flight developed mechanical problems and made an emergency landing in the field located SW of the intersection of US Hwy 88 and US Hwy 11. It was a hard landing and damage to the aircraft is expected to exceed $10,000. No one was injured. Specific cause of mechanical failure has not been determined.

24. **NEWS MEDIA AWARE OF ACCIDENT**
    - a. Yes
    - b. No

25. **NEAREST AIRFIELD**
    - a. Nearest that can handle C-12 (4,000 ft. min.)
    - b. Nearest commercial airfield

26. **WHO WILL INVESTIGATE?**
    - a. Installation Level Accident Investigation (IAI) Board Appointed
    - b. CAI Team

---

**Figure A001-1. DA Form 7305-R, APR 94**

DA FORM 7305-R, APR 94
WORKSHEET FOR TELEPHONIC NOTIFICATION OF GROUND ACCIDENT

For use of this form, see AR 385-40: the proponent agency is OCSA

Immediately notify USASC telephonically of all Class A and B accidents IAW AR 385-40, chapter 3. Phone numbers are:
Commercial: (205) 255-2660/4273/3410 or DSN 558-2660/4273/3410

<table>
<thead>
<tr>
<th>SHADED BLOCKS ARE FOR USASC USE ONLY</th>
<th>A. ASMIS CASE NUMBER</th>
<th>B. TIME &amp; DATE OPERATIONS RECEIVED REPORT</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. POINT OF CONTACT FOR ACCIDENT INFORMATION</td>
<td>a. Name</td>
<td>John Jones</td>
</tr>
<tr>
<td></td>
<td>b. Duty</td>
<td>Commander</td>
</tr>
<tr>
<td></td>
<td>c. Phone Number</td>
<td>DSN: Commercial: 913-555-3478</td>
</tr>
<tr>
<td>2. ACCIDENT CLASSIFICATION</td>
<td>A A</td>
<td>B B</td>
</tr>
<tr>
<td>3. TIME &amp; DATE OF ACCIDENT</td>
<td>a. Year</td>
<td>98</td>
</tr>
<tr>
<td></td>
<td>b. Month</td>
<td>May</td>
</tr>
<tr>
<td></td>
<td>c. Day</td>
<td>10</td>
</tr>
<tr>
<td>4. PERIOD OF DAY</td>
<td>Day</td>
<td></td>
</tr>
<tr>
<td>5. ON/OFF DUTY</td>
<td>On-Duty</td>
<td></td>
</tr>
<tr>
<td>6. TYPE OF EQUIPMENT/MATERIAL INVOLVED</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7. UNIT</td>
<td>3-33 IN Bn, 21 AR Div</td>
<td></td>
</tr>
<tr>
<td>8. MACOM</td>
<td>IV Corps</td>
<td></td>
</tr>
<tr>
<td>9. NIGHT VISION DEVICE IN USE</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>10. EXACT ACCIDENT LOCATION</td>
<td>Intersection of US Hwy 88 and US Hwy 11</td>
<td></td>
</tr>
<tr>
<td>11. ON-POST/OFF-POST?</td>
<td>On-post</td>
<td></td>
</tr>
<tr>
<td>12. MILITARY INSTALLATION NEAREST ACCIDENT SITE</td>
<td>Camp Sherman, MO</td>
<td></td>
</tr>
<tr>
<td>CHECK &quot;YES&quot; or &quot;NO&quot; FOR QUESTIONS 13 THROUGH 17</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>13. EXPLOSIVE/HAZARDOUS/SENSITIVE MATERIALS INVOLVED?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>14. IF YES TO #13, ARE THEY SECURE?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>15. ACCIDENT SITE SECURED IAW DA PAM385-40?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>16. HAS ACCIDENT SITE BEEN DISTURBED?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>17. IF YES TO #16, WERE PHOTOS, ETC. MADE BEFORE DISTURBING THE SCENE?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>18. WEATHER CONDITIONS</td>
<td>Raining</td>
<td></td>
</tr>
<tr>
<td>19. PERSONNEL INVOLVED</td>
<td>a. No. of Personnel by Rank/Category</td>
<td></td>
</tr>
<tr>
<td></td>
<td>1 Officer WO</td>
<td></td>
</tr>
<tr>
<td></td>
<td>1 Enlisted Army Civilian</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Non-Army Civilian</td>
<td></td>
</tr>
<tr>
<td>20. INJURIES (Enter # of each)</td>
<td>1 Fatalities</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Non-Fatal Injuries</td>
<td></td>
</tr>
<tr>
<td>As soon as possible, the following Additional information is required On all injured personnel: name, Personnel classification, degree of Injury and SSAN.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>21. ACCIDENT SYNOPSIS (What Happened)</td>
<td>William Smith crashed his automobile into a traffic light at the intersection of US Hwy 88 and US Hwy 11. Cause of accident has not been determined.</td>
<td></td>
</tr>
<tr>
<td>22. NEWS MEDIA AWARE OF ACCIDENT</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>23. NEAREST AIRFIELD</td>
<td>a. Nearest that can handle C-12 (4,000 ft. min.)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>b. Nearest commercial airfield</td>
<td></td>
</tr>
<tr>
<td>24. WHO WILL INVESTIGATE?</td>
<td>a. Installation Level Accident Investigation (AIL) Board Appointed Yes</td>
<td></td>
</tr>
<tr>
<td></td>
<td>b. CAI Team Dispatched Yes</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Team:</td>
<td></td>
</tr>
</tbody>
</table>

DA FORM 7306-R, APR 94

Figure A001-2. DA Form 7306-R, APR 94
GENERAL INSTRUCTIONS: Use (1) to acknowledge receipt of message and indicate planned or accomplished action or (2) to validate intelligence collection requirements. Transmittal of the message implies understanding of the received message. Reference: FM 11-1.

LINE 1 – DATE AND TIME __________________________ (DTG)

LINE 2 – UNIT ________________________________ (Unit Making Report)

LINE 3 – ACKNOWLEDGE ________________________ (Report Type)

LINE 4 – ORIGINATOR __________________________ (Originator of Report Acknowledged)

LINE 5 – SERIAL ________________________________ (Serial Number or DTG of Report Acknowledged)

LINE 6 – RESPONSE ______________________________ (Response to Report Acknowledged ACKNOWLEDGE, WILCO)

LINE 7 – VALIDATION STATUS ____________________ (Response to Intelligence Collection Requirement: VALID, NONVALID, VALID WITH CHANGE)

LINE 8 – NARRATIVE ____________________________ (Free Text for Additional Information Required for Clarification of Report)

LINE 9 – AUTHENTICATION ________________________ (Report Authentication)
TITLE: AIR DEFENSE COMMAND MESSAGE [AIRDEFCOM]
REPORT NUMBER: A010 {USMTF # E710}

GENERAL INSTRUCTIONS: Use (1) to direct weapon system engagement for defense or air support and (2) to provide receipt of or compliance with commands. Reference: FM 44-100.

LINE 1 – DATE AND TIME ________________________________ (DTG)
LINE 2 – UNIT ________________________________ (Unit Making Report)
LINE 3 – COMMAND ________________________________ (Command Action Directed)
LINE 4 – TRACK ________________________________ (Track Number)
LINE 5 – POSITION ________________________________ (UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator)
LINE 6 – NO. TYPE ________________________________ (Number and Type of Aircraft)
LINE 7 – WEAPON ________________________________ (Weapon Type)
LINE 8 – NARRATIVE ________________________________ (Free Text for Additional Information Required for Clarification of Report)
LINE 9 – AUTHENTICATION ________________________________ (Report Authentication)
GENERAL INSTRUCTIONS: Use (1) to inform the requesting component command whether a request has been approved or disapproved and (2) to inform the complying command that it will satisfy the request in the immediate air tasking, SAR, or airlift. Reference: FM 1-100. (See also Figure A015.)

LINE 1 – DATE AND TIME __________________________________ (DTG)
LINE 2 – UNIT _____________________________________________ (Unit Making Report)
LINE 3 – REQUEST _________________________________________ (Request Number)
LINE 4 – COMMAND _______________________________________ (Requesting Command)
LINE 5 – STATUS __________________________________________ (Status of Request: APPROVED or DISAPPROVED)

** If status is DISAPPROVED, skip to Line 10.

LINE 6 – TASKED __________________________________________ (Command Tasked to Comply With and Satisfy the Request)
LINE 7 – PRIORITY _________________________________________ (Revised Priority: 1, 1A through 1Z; 2, 2A through 2Z; 3, 3A Through 3Z; 4, 4A through 4Z)
LINE 8 – MISSION _________________________________________ (Type of Mission: CAS, EW, RECONNAISSANCE, and so on)
LINE 9 – START ___________________________________________ (DTG Time That Aircraft Are to Arrive on Mission Location)
LINE 10 – NO. TYPE _________________________________________ (Number and Type Aircraft)
LINE 11 – NARRATIVE _____________________________________ (Free Text for Additional Information Required for Clarification of Report)
LINE 12 – AUTHENTICATION _______________________________ (Report Authentication)
SAMPLE TACAIR Briefing Form (9 Line)

(Omit data not required. Do not transmit line number. Units of measure are standard unless otherwise specified. *Denotes minimum essential information in limited communications. Bold denotes readback items when requested.)

Terminal controller: ________________________________, this is ________________________________, (Aircraft Call Sign) (Terminal Controller)

Line 1 - *IP/BP: ________________________________.

Line 2 - *Heading: ________________________________ (Magnetic).

Offset: ________________________________ (Left/Right).

Line 3 - *Distance: ________________________________.

(IP-to-target in nautical miles/ BP-to-target in meters)

Line 4 - *Target Elevation: ________________________________ (in feet MSL).

Line 5 - *Target Description: ________________________________.

Line 6 - *Target Location: ________________________________.

(Latitude/Longitude or Grid Coordinates or Offsets or Visual)

Line 7 - Type Mark: ___________ Code: ___________

(Laser, WP, IR, Beacon) (Actual Code)

Line 8 - *Location of Friendlies: ________________________________.

Position Marked by: ________________________________.

Line 9 - Egress: ________________________________.

In the event of a beacon request, insert beacon bombing chart line numbers below.

Remarks (As Appropriate): ________________________________.

(Threats, reactions, danger close, attack clearances, SEAD, abort codes, hazards)

NOTE: For AC-130 employment, lines 5, 6, and 8 are mandatory briefing items. Remarks should also include detailed threat description, marking method of friendly locations (including magnetic bearing and distance in meters from the friendly position to the target, if available). Identifiable ground features, danger close acceptance.

Time on Target (TOT): ________________________________.

Or

Time to Target (TTT): Standby ________________________________ plus ________________________________ Hack.

Figure A015. Sample TACAIR Briefing Form (9 Line)
TITLE: AIR SUPPORT REQUEST [AIRSUPREQ]
REPORT NUMBER: A020 {USMTF # D670}

GENERAL INSTRUCTIONS: Use to request preplanned and immediate close-air support, interdiction, reconnaissance, surveillance, escort, helicopter airlift, and other aircraft missions. For expedient hard copy or voice request use DD Form 1972 (Revised) 15 NOV 1994 (see Figure A020) or Sample TACAIR Briefing Form (see Figure A015).

LINE 1 – DATE AND TIME ____________________________ (DTG)
LINE 2 – UNIT ____________________________ (Unit Making Request)
LINE 3 – EXER ____________________________ (Exercise ID)
LINE 4 – OPER ____________________________ (Operation ID Data)
LINE 5 – MSGID ____________________________ (AIRSUPREQ)
LINE 6 – REF ____________________________ (Reference)
LINE 7 – AMPM ____________________________ (Amplification)
LINE 8 – NARRATIVE ____________________________ (Free Text for Additional Information Required for Clarification of Report)
LINE 9 – CANX ____________________________ (Message Cancellation With New Information Provided)
LINE 10 – PERID ____________________________ (Effective DTG of Requested Mission)
LINE 11 – REQUEST ____________________________ (Air Mission Request Information)
LINE 12 – MSNLOC ____________________________ (Air Mission Location Information)
LINE 13 – CONTROL ____________________________ (Air Mission Control Agency Information)
LINE 14 – GNDFRNF ____________________________ (Ground Location Information of Friendly Troops)
LINE 15 – TGTDESC ____________________________ (Target Description Information)

**Continued on next page.
LINE 16 – GUIDED ________________________________ (Laser Guided Weapons Information)
LINE 17 – BEACON____________________________ (Beacon Description)
LINE 18 – SHIPTGT ____________________________ (Ship Target Information)
LINE 19 – SHIPPOS _____________________________ (Ship Position and Movement Data)
LINE 20 – MOVAA ______________________________ (Movement and Antiair Warfare Axis Information)
LINE 21 – FACSCD ______________________________ (Forward Air Controller Aircraft Schedule)
LINE 22 – EWDATA ______________________________ (Electronic Warfare Information)
LINE 23 – CHAFE ________________________________ (Chafe Mission Information)
LINE 24 – RECDATA ____________________________ (Reconnaissance Mission Information)
LINE 25 – DELADDR ______________________________ (Delivery Address)
LINE 26 – REPORT ______________________________ (Report Requirements)
LINE 27 – AIRDROP ______________________________ (Drop Zone Data)
LINE 28 – ROUTE ________________________________ (Aircraft Route Data)
LINE 29 – REFUELD ______________________________ (Air-to-Air Refueling Data)
LINE 30 – REFUEL ______________________________ (Air-to-Air Refueling)
LINE 31 – ESCDATA ______________________________ (Escort Mission Data)
LINE 32 – AUTHENTICATION ________________________ (Report Authentication)
### JOINT TACTICAL AIR STRIKE REQUEST

**SECTION I - MISSION REQUEST**

<table>
<thead>
<tr>
<th>UNIT CALLED</th>
<th>THRU</th>
<th>REQUEST NUMBER</th>
<th>UNIT SENT</th>
<th>DATE</th>
</tr>
</thead>
</table>

**PRELIMINARY**

- A. PREFERENCE
- B. IMPORTANCE
- C. IMMEDIATE

2. RECEIVED

<table>
<thead>
<tr>
<th>TIME</th>
<th>BY</th>
</tr>
</thead>
</table>

3. (RADAR) INCLUDE

- A. FRIENDS
- B. ADVERSARIES

**TARGET LOCATION**

- A. (COORDINATES)
- B. (COORDINATES)
- C. (COORDINATES)
- D. (COORDINATES)

- E. TOT ELEV.
- F. SPNS NO.
- G. SERIES
- H. CHART NO.

5. TARGET DATE

- A. ASAP
- B. LAT
- C. AT
- D. TO

6. DESIRED ORI RESULTS

- A. ORDIANCE
- B. DESTRUCTION
- C. NEUTRALIZATION
- D. MAINTAIN EFFECT

**FINAL OPTION**

- A. FACILITY
- B. CALL SIGN
- C. FREQUENCY

**REMARKS**

- 1. FORMS
- 2. MADOFFER
- 3. OFFICIAL
- 4. RATING
- 5. TOT ELEVATION
- 6. DESCRIPTION
- 7. LOCATION
- 8. FREQUENCY

**SECTION II - COORDINATION**

12. REQUEST

- A. APPROVED
- B. DISAPPROVED

13. AIRSPACE COORDINATION AREA

- A. IS NOT EFFECT
- B. IS IN EFFECT

14. LOCATION

- A. MILES
- B. METERS

**SECTION III - MISSION DATA**

15. MISSION NUMBER

16. CALL SIGN

17. NO. AND TYPE AIRCRAFT

18. ORDIANCE

19. ESTAC TAKOFF

20. CONTACT/WEAPONS

21. BATTLE DAMAGE ASSESSMENT (BDA) REPORT

**REMARKS**

- TRANSPORT AS APPROPRIATE

---


Figure A020. DD Form 1972, Joint Tactical Air Strike Request
GENERAL INSTRUCTIONS: Use to request that a specific airspace control means be specified in a future airspace control order. Reference: FM 100-103.

LINE 1 – DATE AND TIME _________________________________ (DTG)
LINE 2 – UNIT _________________________________ (Unit Making Report)
LINE 3 – REQUESTING UNIT ________________________________ (Name of Unit or Agency Requesting Airspace)
LINE 4 – TYPE _________________________________ (Type of Airspace)
LINE 5 – AIRSPACE ________________________________ (Name of Airspace)
LINE 6 – PURPOSE ________________________________ (Purpose of Special Use Airspace)
LINE 7 – TRANSIT ________________________________ (Transit Instructions)
LINE 8 – FROM ________________________________ (DTG to be Established)
LINE 9 – UNTIL ________________________________ (DTG to be Disestablished)
LINE 10 – AREA ________________________________ (Description of the Area to be Defined (Boundary or Circle))
LINE 11 – COORDINATES ________________________________ (UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator)
LINE 12 – WIDTH/RADIUS ________________________________ (Width or Radius)
LINE 13 – LOWER ________________________________ (Lower Altitude of Designated Area to Nearest 100 Feet or Ground Level)
LINE 14 – UPPER ________________________________ (Upper Altitude of Designated Area to Nearest 100 Feet)
LINE 15 – CONTACT ________________________________ (Call Sign of Control Agency)
LINE 16 – PRIMARY ________________________________ (Primary Frequency or Frequency Designator)

***Continued on next page.
TITLE: AIRSPACE CONTROL MEANS REQUEST [ACMREQ] (CONTINUED)
REPORT NUMBER: A025 {USMTF # F658}

LINE 17 – SECONDARY ____________________________________ (Secondary Frequency or Frequency Designator)

LINE 18 – NARRATIVE _____________________________________ (Free Text for Additional Information Required for Clarification of Report)

LINE 19 – AUTHENTICATION _______________________________ (Report Authentication)
GENERAL INSTRUCTIONS: Use to provide specific detailed orders for airspace management from a higher command to subordinate units. Reference: FM 100-103-2.

LINE 1 – DATE AND TIME ________________________________ (DTG)
LINE 2 – UNIT _________________________________________ (Unit Making Report)
LINE 3 – AIRSPACE ____________________________________ (Type of Airspace)
LINE 4 – NUMBER ______________________________________ (Name or Serial Number of Area)
LINE 5 – FROM ________________________________________ (DTG Area to be Established)
LINE 6 – UNTIL ________________________________________ (DTG Area to be Disestablished)
LINE 7 – ACTION ______________________________________ (Type Action: ESTABLISH or CANCEL)
LINE 8 – SERIAL NUMBER______________________________ (ACO Serial Number)
LINE 9 – AREA _________________________________________ (Description of the Area to be Defined (Boundary or Circle))
LINE 10 – COORDINATES_______________________________ (UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator)
LINE 11 – WIDTH/RADIUS ______________________________ (Width or Radius)
LINE 12 – LOWER _____________________________________ (Lower Altitude of Designated Area to Nearest 100 Feet or Ground Level)
LINE 13 – UPPER _____________________________________ (Upper Altitude of Designated Area to Nearest 100 Feet)
LINE 14 – CONTACT ___________________________________ (Call Sign of Control Agency)
LINE 15 – PRIMARY____________________________________ (Primary Frequency or Frequency Designator)
LINE 16 – SECONDARY __________________________________ (Secondary Frequency or Frequency Designator)

**Continued on next page.**
TITLE: AIRSPACE CONTROL ORDER [ACO] (CONTINUED)
REPORT NUMBER: A030 {USMTF # F756}

LINE 17 – NARRATIVE _____________________________________ (Free Text for Additional Information Required for Clarification of Report)

LINE 18 – AUTHENTICATION _______________________________ (Report Authentication)
GENERAL INSTRUCTIONS: Use to report ammunition status periodically or when requested. Reference: FM 6-20-30 and FM 6-20-40.

LINE 1 – DATE AND TIME ________________________________ (DTG)
LINE 2 – UNIT _________________________________________ (Unit Making Report)
LINE 3 – PLAN _________________________________________ (Fire Plan Designation)
LINE 4 – AMMO _________________________________________ (Projectile Type and Quantity)
LINE 5 – AMMO _________________________________________ (Projectile Type and Quantity)
LINE 6 – AMMO _________________________________________ (Projectile Type and Quantity)
LINE 7 – AMMO _________________________________________ (Projectile Type and Quantity)
LINE 8 – AMMO _________________________________________ (Projectile Type and Quantity)
LINE 9 – AMMO _________________________________________ (Projectile Type and Quantity)
LINE 10 – AMMO _______________________________________ (Propellant Type and Quantity)
LINE 11 – AMMO _______________________________________ (Propellant Type and Quantity)
LINE 12 – AMMO _______________________________________ (Propellant Type and Quantity)
LINE 13 – AMMO _______________________________________ (Propellant Type and Quantity)
LINE 14 – AMMO _______________________________________ (Propellant Type and Quantity)
LINE 15 – AMMO _______________________________________ (Propellant Type and Quantity)
LINE 16 – AMMO _______________________________________ (Propellant Type and Quantity)
LINE 17 – FUZE _________________________________________ (Fuze Type and Quantity)
LINE 18 – FUZE _________________________________________ (Fuze Type and Quantity)
LINE 19 – FUZE _________________________________________ (Fuze Type and Quantity)
LINE 20 – FUZE _________________________________________ (Fuze Type and Quantity)
LINE 21 – FUZE _________________________________________ (Fuze Type and Quantity)

**Continued on next page.
TITLE: AMMUNITION FIRE UNIT-AMMUNITION STATUS [AFU.AMS] (CONTINUED)
REPORT NUMBER: A035 {USMTF # B230}

LINE 22 – WARHEAD ________________________________ (Warhead Mark Number, Nuclear Weapon Model Y Number)

LINE 23 – NUCLEAR WEAPON QTY _________________________ (Nuclear Weapons Quantity)

LINE 24 – NUCLEAR WEAPON QTY _________________________ (Nuclear Weapons Quantity)

LINE 25 – NARRATIVE ________________________________ (Free Text for Additional Information Required for Clarification of Report)

LINE 26 – AUTHENTICATION _____________________________ (Report Authentication)
GENERAL INSTRUCTIONS: Use (1) to report the required supply rate, (2) to establish the controlled supply rate, and (3) to update the amount of expended ammunition in relation to the controlled supply rate. Reference: FM 6-20-30 and FM 6-20-40.

LINE 1 – DATE AND TIME ________________________________ (DTG)
LINE 2 – UNIT ________________________________ (Unit Making Report)
LINE 3 – POI ________________________________ (Primary Option Indicator. Enter ADD, AMEND, or CANCEL)
LINE 4 – PLAN ________________________________ (Fire Plan Designation)
LINE 5 – WEAPON ________________________________ (Surface-to-Surface Weapon Type)
LINE 6 – REQUIRED ________________________________ (Projectile Type and Required Supply Rate)
LINE 7 – REQUIRED ________________________________ (Projectile Type and Required Supply Rate)
LINE 8 – REQUIRED ________________________________ (Projectile Type and Required Supply Rate)
LINE 9 – REQUIRED ________________________________ (Projectile Type and Required Supply Rate)
LINE 10 – REQUIRED ________________________________ (Projectile Type and Required Supply Rate)
LINE 11 – REQUIRED ________________________________ (Projectile Type and Required Supply Rate)
LINE 12 – CONTROLLED ________________________________ (Projectile Type and Controlled Supply Rate)
LINE 13 – CONTROLLED ________________________________ (Projectile Type and Controlled Supply Rate)
LINE 14 – CONTROLLED ________________________________ (Projectile Type and Controlled Supply Rate)
LINE 15 – CONTROLLED ________________________________ (Projectile Type and Controlled Supply Rate)

**Continued on next page.**
TITLE: AMMUNITION FIRE UNIT-AMMUNITION SUPPLY RATE [AFU.ASR]
(CONTINUED)
REPORT NUMBER: A040 {USMTF # F231}

LINE 16 – CONTROLLED ________________________________ (Projectile Type and Controlled Supply Rate)

LINE 17 – CONTROLLED ________________________________ (Projectile Type and Controlled Supply Rate)

LINE 18 – EXPENDED _________________________________ (Projectile Type and Ammunition Expended)

LINE 19 – EXPENDED _________________________________ (Projectile Type and Ammunition Expended)

LINE 20 – EXPENDED _________________________________ (Projectile Type and Ammunition Expended)

LINE 21 – EXPENDED _________________________________ (Projectile Type and Ammunition Expended)

LINE 22 – EXPENDED _________________________________ (Projectile Type and Ammunition Expended)

LINE 23 – EXPENDED _________________________________ (Projectile Type and Ammunition Expended)

LINE 24 – NARRATIVE ________________________________ (Free Text for Additional Information Required for Clarification of Report)

LINE 25 – AUTHENTICATION ____________________________ (Report Authentication)
GENERAL INSTRUCTIONS: Use to exchange battalion/regiment missions and assignments and changes thereto, preplanned fire position areas, and movement orders for battalion/regiment or fire units. Reference: FM 6-20-30 and FM 6-20-40.

LINE 1 – DATE AND TIME ________________________________ (DTG)
LINE 2 – UNIT __________________________________________ (Unit Making Report)
LINE 3 – POI ____________________________________________ (Primary Option Indicator. Enter ADD, AMEND, or CANCEL)
LINE 4 – PLAN __________________________________________ (Fire Plan Designation)
LINE 5 – WEAPON ________________________________________ (Surface-to-Surface Weapon Type)
LINE 6 – MISSION ________________________________________ (Mission of the Fire Unit)
LINE 7 – ZOR ___________________________________________ (Zone of Responsibility of the Fire Unit)
LINE 8 – TIME OF MISSION ________________________________ (DTG the Mission Assignment is Effective)
LINE 9 – TIME MISSION ENDS ______________________________ (DTG the Mission Assignment End)
LINE 10 – SUPPORT DESIGNATOR_________________________ (Use When the Mission Assigned in Line 6 is DS, GS, or GSR. Enter the Battery/Company Designator (if Appropriate) Followed by the Battalion Designator; Followed by the Brigade/Division Designator of the Supported Unit; Followed by the Designator of the Corps or Echelon Above Corps Being Supported)
LINE 11 – UTM GZ _________________________________________ (Enter the UTM Grid Zone and 100-KM Square Identification)

**Continued on next page.**
LINES 12 – 21 UTM______________________________ (Number of the Point Followed by the UTM 1-Meter Easting and Northing of Each Point Used to Delineate the Battery Position Area)

LINE 13 – AZ OF FIRE ____________________________ (For FA Units, Enter the Azimuth of Fire of the Unit in Line 2. Not Used for (NSF) Units)

LINE 14 – DTG MVT OF FIRE UNIT _______________ (DTG and Time Zone Movement the Fire Unit in Line 2 Will Begin)

LINE 15 – DTG MVT COMPLETE____________________ (DTG and Time Zone the Fire Unit in Line 2 is to Close (Complete Movement) Into the New Position Area)

LINE 16 – NARRATIVE ____________________________ (Free Text for Additional Information Required for Clarification of Report)

LINE 17 – AUTHENTICATION ________________________ (Report Authentication)
TITLE: AMMUNITION FIRE UNIT-FIRE STATUS [AFU.FUS]
REPORT NUMBER: A050 {USMTF # B220}

GENERAL INSTRUCTIONS: Use to provide information on the friendly fire unit situation for making tactical fire direction decisions. Reference: FM 6-20-30 and FM 6-20-40.

LINE 1 – DATE AND TIME ________________________________ (DTG)

LINE 2 – UNIT ________________________________________ (Unit Making Report)

LINE 3 – POI __________________________________________ (Primary Option Indicator. Enter ADD, AMEND, or CANCEL)

LINE 4 – PLAN _________________________________________ (Fire Plan Designation)

LINE 5 – STATUS ______________________________________ (Fire Unit Status)

LINE 6 – RETURN______________________________________ (Expected DTG Return to Operation)

LINE 7 – WEAPONS ____________________________________ (Number of Weapons, Surface-to-Surface Weapon Type)

LINE 8 – MODEL NO. ___________________________________ (Artillery Weapon Model Number)

LINE 9 – RESPONSE____________________________________ (Unit Response DTG in Minutes)

LINE 10 – ZONE ________________________________________ (UTM Grid Zone and 100-KM Square)

LINE 11 – GRID ________________________________________ (UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator)

LINE 12 – AZIMUTH ____________________________________ (Azimuth of Fire in Mils)

LINE 13 – MIN _________________________________________ (Minimum Range in Meters)

LINE 14 – MAX _________________________________________ (Munitions Range Limitation Designator and Maximum Range in Meters)

**Continued on next page.
TITLE: AMMUNITION FIRE UNIT-FIRE STATUS [AFU.FUS] (CONTINUED)
REPORT NUMBER: A050 {USMTF # B220}

LINE 15 – MAX ____________________________________________ (Munitions Range Limitation Designator and Maximum Range in Meters)

LINE 16 – MAX ____________________________________________ (Munitions Range Limitation Designator and Maximum Range in Meters)

LINE 17 – MAX ____________________________________________ (Munitions Range Limitation Designator and Maximum Range in Meters)

LINE 18 – MAX ____________________________________________ (Munitions Range Limitation Designator and Maximum Range in Meters)

LINE 19 – MAX ____________________________________________ (Munitions Range Limitation Designator and Maximum Range in Meters)

LINE 20 – MAX ____________________________________________ (Munitions Range Limitation Designator and Maximum Range in Meters)

LINE 21 – MAX RATE ______________________________________ (Maximum Rate of Fire in Rounds per Weapon per Minute)

LINE 22 – SUSTAIN ________________________________________ (Sustained Rate of Fire in Rounds per Weapon per Minute)

LINE 23 – AUTHORIZED ____________________________________ (Fire Unit Authorized Ammunition Indicator)

LINE 24 – AUTHORIZED ____________________________________ (Fire Unit Authorized Ammunition Indicator)

**Continued on next page.**
TITLE: AMMUNITION FIRE UNIT-FIRE STATUS [AFU.FUS]  (CONTINUED)
REPORT NUMBER: A050 {USMTF # B220}

LINE 25 – LEFT LIMIT ____________________________ (Azimuth of Left Traverse Limit in Mils)

LINE 26 – RIGHT LIMIT ____________________________ (Azimuth of Right Traverse Limit in Mils)

LINE 27 – MISSION ________________________________ (Fire Unit Mission)

LINE 28 – ZONE OF FIRE ____________________________ (Zone of Fire (Responsibility))

LINE 29 – SUPPORTING ____________________________ (Battery/Company, Battalion/Regiment, and Regiment/Brigade/Division Designators/Corps or Echelon Above Corps)

LINE 30 – REINFORCING ____________________________ (Battalion/Regiment and Regiment/Brigade/Division Designators)

LINE 31 – EXPOSURE ________________________________ (Nuclear Radiation Exposure Status)

LINE 32 – NVC ________________________________ (Nuclear Vulnerability Category)

LINE 33 – NARRATIVE ______________________________ (Free Text for Additional Information Required for Clarification of Report)

**Repeat lines 1 through 33 if required. Assign sequential line numbers to succeeding iterations; for example, first iteration 1 through 33; second iteration, 1a through 33a, and so on.

LINE 34 – AUTHENTICATION ____________________________ (Report Authentication)
**AMMUNITION FIRE UNIT-FIRING SITE DATA [AFU.FSD]**

**REPORT NUMBER:** A055 {USMTF # B280}

**GENERAL INSTRUCTIONS:** Use to establish and exchange dispersed firing site data for individual cannon, rocket, or missile weapons for the purpose of making tactical fire direction decisions. Reference: FM 6-20-30 and FM 6-20-40.

**LINE 1 – DATE AND TIME ________________________________ (DTG)**

**LINE 2 – UNIT _________________________________________ (Unit Making Report)**

**LINE 3 – POI __________________________________________ (Primary Option Indicator. Enter ADD, AMEND, or CANCEL)**

**LINE 4 – PLAN _________________________________________ (Fire Plan Designation)**

**LINE 5 – ZONE _________________________________________ (UTM Grid Zone and 100-KM Square)**

**LINE 6 – POSITION ____________________________________ (UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator)**

**LINE 7 – UTM _________________________________________ (UTM 1-Meter Easting, UTM 1-Meter Northing, and Altitude in Meters)**

**LINE 8 – RESPONSE ___________________________________ (Firing Site Response Time)**

**LINE 9 – HE __________________________________________ (Number of High-Explosive Warheads)**

**LINE 10 – ICM _________________________________________ (Number of Dual Purpose ICM Warheads)**

**LINE 11 – MISSILE ASSEMBLIES _________________________ (Number of Main Missile Assemblies)**

**LINE 12 – POSTURE ____________________________________ (Firing Site Response Posture)**

**LINE 13 – STATUS _____________________________________ (Fire Unit Status)**

**LINE 14 – RETURN TO OPERATION_______________________ (Expected Time, Return to Operation)**

**LINE 15 – RADIATION STATUS__________________________ (Nuclear Radiation Exposure Status)**

***Continued on next page.***
TITLE: AMMUNITION FIRE UNIT-FIRING SITE DATA [AFU.FSD] (CONTINUED)
REPORT NUMBER: A055 {USMTF # B280}

LINE 16 – NVC ____________________________________________ (Nuclear Vulnerability Category)

LINE 17 – WARHEAD UPLOADED ___________________________ (Warhead Type on Launcher)

LINE 18 – NARRATIVE _____________________________________ (Free Text for Additional Information Required for Clarification of Report)

**Repeat lines 5 through 18 up to four iterations if required. Assign sequential line numbers to succeeding iterations; for example, first iteration, 5 through 18; second iteration, 19 through 32; third iteration, 33 through 46; and so on.

LINE 19 – AUTHENTICATION _______________________________ (Report Authentication)
TITLE: AMMUNITION FIRE UNIT-MISSION FIRED REPORT [AFU.MFR]
REPORT NUMBER: A060 {USMTF # C241}

GENERAL INSTRUCTIONS: Use to provide target information, ammunition expenditure, and target disposition following engagement of a target. Reference: FM 6-20-30, FM 6-20-40, and FM 6-71.

LINE 1 – DATE AND TIME ________________________________ (DTG)
LINE 2 – UNIT _________________________________________ (Unit Making Report)
LINE 3 – TARGET NO. ____________________________________ (Fire Support Target Number)
LINE 4 – ZONE _________________________________________ (UTM Grid Zone and 100-KM Square)
LINE 5 – GRID _________________________________________ (UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator)
LINE 6 – TARGET ELEMENTS ____________________________ (Number of Target Elements)
LINE 7 – TARGET TYPE __________________________________ (Target Type, Subtype, and Degree of Personnel Protection)
LINE 8 – RADIUS ________________________________________ (Target Radius in Meters)
LINE 9 – LENGTH ________________________________________ (Target Length in Meters)
LINE 10 – WIDTH ________________________________________ (Target Width in Meters)
LINE 11 – ATTITUDE ____________________________________ (Attitude in Mils)
LINE 12 – CREDIBILITY ___________________________________ (Target Acquisition Agency)
LINE 13 – TRA __________________________________________ (Target Report Accuracy)
LINE 14 – RELIABILITY ___________________________________ (Evaluation of Reliability)
LINE 15 – NO. TEC ________________________________________ (Number of Target Element Casualties)
LINE 16 – TARGET DISPOSITION ___________________________ (Fire Support Target Disposition)
LINE 17 – SHIP CALL SIGN _______________________________ (Ship Call Sign(s))

**Continued on next page.
TITLE: AMMUNITION FIRE UNIT-MISSION FIRED REPORT [AFU.MFR] (CONTINUED)
REPORT NUMBER: A060 {USMTF # C241}

LINE 18 – NO. RDS ____________________________ (Number of Rounds Expended,
Followed by Projectile Type,
Followed by Fuze Type)

LINE 19 – UNIT ________________________________ (Section, Platoon, and Battery/
Company, Battalion/Regiment,
and Regiment/Brigade/Division
Designators)

LINE 20 – NO. RDS ____________________________ (Number of Rounds Expended,
Followed by Projectile Type,
Followed by Fuze Type)

LINE 21 – UNIT ________________________________ (Section, Platoon, and Battery/
Company, Battalion/Regiment,
and Regiment/Brigade/Division
Designators)

LINE 22 – NO. RDS ____________________________ (Number of Rounds Expended,
Followed by Projectile Type,
Followed by Fuze Type)

LINE 23 – NARRATIVE ____________________________ (Free Text for Additional
Information Required for
Clarification of Report)

LINE 24 – AUTHENTICATION ____________________________ (Report Authentication)
TITLE: ARTILLERY TARGET INTELLIGENCE-ARTILLERY TARGET REPORT [ATLATRI]
REPORT NUMBER: A070 {USMTF # C281}

GENERAL INSTRUCTIONS: Use to exchange artillery target information among fire support agencies. Reference: FM 6-20-30 and FM 6-20-40.

LINE 1 – DATE AND TIME ________________________________ (DTG)
LINE 2 – UNIT ___________________________________________ (Unit Making Report)
LINE 3 – POI ____________________________________________ (Primary Option Indicator. Enter ADD, AMEND, or CANCEL)
LINE 4 – TARGET NO.______________________________________ (Fire Support Target Number)
LINE 5 – EFFECTS _________________________________________ (Effects (Percent Damage) Required)
LINE 6 – ZONE ____________________________________________ (UTM Grid Zone and 100-KM Square)
LINE 7 – GRID_____________________________________________ (UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator)
LINE 8 – TARGET ELEMENTS _______________________________ (Number of Target Elements)
LINE 9 – TARGET __________________________________________ (Target Type and Subtype, and Degree of Personnel Protection)
LINE 10 – RADIUS _________________________________________ (Target Radius in Meters)
LINE 11 – LENGTH_________________________________________ (Target Length in Meters)
LINE 12 – WIDTH __________________________________________ (Target Width in Meters)
LINE 13 – ATTITUDE _______________________________________ (Attitude in Milks)
LINE 14 – CREDIBILITY ____________________________________ (Target Acquisition Agency)
LINE 15 – TARGET ACCURACY _______________________________ (Target Report Accuracy in Meters)
LINE 16 – RELIABILITY ____________________________________ (Evaluation of Reliability)
LINE 17 – PERMANENCE ____________________________________ (Target Permanence)

**Continued on next page.
TITLE: ARTILLERY TARGET INTELLIGENCE-ARTILLERY TARGET REPORT
[ATLATRI] (CONTINUED)
REPORT NUMBER: A070 {USMTF # C281}

LINE 18 – TARGET STATUS ________________________________
(Mission Fired Indicator or Confirmed Target Indicator)

LINE 19 – NUCLEAR ________________________________
(Target of Nuclear Interest Indicator)

LINE 20 – MASK ________________________________
(Personnel Clothing and Mask Indicator)

LINE 21 – PROFICIENCY ________________________________
(Enemy NBC Proficiency Level)

LINE 22 – VEGETATION ________________________________
(Target Vegetation)

LINE 23 – CASUALTIES ________________________________
(Number of Target Element Casualties)

LINE 24 – TGT DISPOSITION ________________________________
(Fire Support Target Disposition)

LINE 25 – CATEGORY ________________________________
(Information Request Category)

LINE 26 – SRI ________________________________
(Standing Request for Artillery Target Information Number)

LINE 27 – NARRATIVE ________________________________
(Free Text for Additional Information Required for Clarification of Report)

LINE 28 – AUTHENTICATION ________________________________
(Report Authentication)
GENERAL INSTRUCTIONS: Use to disseminate the commander’s established targeting criteria. Reference: FM 6-20-30 and FM 6-20-40.

LINE 1 – DATE AND TIME ___________________________ (DTG)
LINE 2 – UNIT ____________________________________ (Unit Making Report)
LINE 3 – POI ______________________________________ (Primary Option Indicator. Enter ADD, AMEND, or CANCEL)
LINE 4 – REQUEST __________________________________ (Request Number, Target Criteria)
LINE 5 – ZONE ONE ________________________________ (Zone of Fire (Responsibility))
LINE 6 – ZONE TWO ________________________________ (Zone of Fire (Responsibility))
LINE 7 – GRID ZONE ________________________________ (UTM Grid Zone and 100-KM Square)
LINE 8 – QUADRANGLE ______________________________ (UTM 1-Meter Easting and UTM 1-Meter Northing)
LINE 9 – UTM _____________________________________ (UTM 1-Meter Easting and UTM 1-Meter Northing)
LINE 10 – WIDTH ___________________________________ (Search Zone Width in Meters)
LINE 11 – CIRCLE ___________________________________ (UTM 1-Meter Easting and UTM 1-Meter Northing)
LINE 12 – RADIUS ___________________________________ (Circular Radius in Meters)
LINE 13 – FLOT DISTANCE ____________________________ (Minimum Distance)
LINE 14 – MAX _____________________________________ (Maximum Distance)
LINE 15 – FORMAT __________________________________ (Output Report Category)
LINE 16 – TARGET TYPE _____________________________ (Target Type and Subtype)

**Continued on next page.**
TITLE: ARTILLERY TARGET INTELLIGENCE-TARGET CRITERIA [ATI.TCRIT]
(CONTINUED)
REPORT NUMBER: A075 {USMTF # D281}

LINE 17 – PROTECTION ________________________________ (Degree of Personnel Protection)

LINE 18 – PERMANENCE ________________________________ (Target Permanence)

LINE 19 – LOWER STRENGTH ____________________________ (Lower Strength Limit)

LINE 20 – UPPER STRENGTH ____________________________ (Upper Strength Limit)

LINE 21 – LOWER SIZE _________________________________ (Lower Length Limit in Meters)

LINE 22 – LOWER WIDTH _______________________________ (Lower Width Limit in Meters)

LINE 23 – UPPER SIZE _________________________________ (Upper Length Limit in Meters)

LINE 24 – UPPER WIDTH _______________________________ (Upper Width Limit in Meters)

LINE 25 – ACCURACY _________________________________ (Target Report Accuracy in Meters)

LINE 26 – RELIABILITY _______________________________ (Evaluation of Reliability)

LINE 27 – NARRATIVE ________________________________ (Free Text for Additional Information Required for Clarification of Report)

LINE 28 – AUTHENTICATION ____________________________ (Report Authentication)
TITLE: ASSET/MULTIPLE ASSET STATUS REPORT [ASTSTATREP]
REPORT NUMBER: A080

GENERAL INSTRUCTIONS: Use to convey the status of the unit’s intelligence collectors. Send every four hours or upon loss to enemy or loss of contact with an asset. Send over the O&I net with PRIORITY precedence. Reference: FM 34-3.

LINE 1 – DATE AND TIME ________________________________ (DTG)
LINE 2 – UNIT ___________________________________________ (Unit Making Report)
LINE 3 – T/O _____________________________________________ (Task Organization of Intelligence Collectors)
LINE 4 – COLLECTOR ______________________________________ (Collector by Team/System; Collectors by Type and Team/System)
LINE 5 – GRID ___________________________________________ (UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator or NO CHANGE)
LINE 6 – ACTIVITY ________________________________________ (Brief Summary of Activity)
LINE 7 – NARRATIVE ______________________________________ (Free Text for Additional Information Required for Clarification of Report)
LINE 8 – AUTHENTICATION ________________________________ (Report Authentication)
TITLE: AVIATION (ARMY ROTARY WING) MISSION/SUPPORT REQUEST [AVIAREQ]
REPORT NUMBER: A085

GENERAL INSTRUCTIONS: Use to request Army aviation units for support. Send from subordinate units to division/corps aviation cell at the main command post. Reference: FM 1-100 and FM 1-114.

LINE 1 – DATE AND TIME ________________________________ (DTG)
LINE 2 – UNIT _________________________________________ (Unit Making Report)
LINE 3 – ASSETS ________________________________________ (Assets Required)
EXAMPLE: Three (3) CH-47s
LINE 4 – PURPOSE ______________________________________ (Purpose)
EXAMPLE: Emergency Logistical Resupply of Class IV at BP 53
LINE 5 – PRIORITY ______________________________________ (Priority)
LINE 6 – DTG and GRID of PZ_____________________________ (DTG and Location of Pickup Zone, include marking system, frequency and call sign of unit at the PZ)
LINE 7 – DTG and GRID of LZ_____________________________ (DTG and Location of Loading Zone, include marking system, frequency and call sign of unit at the LZ)
LINE 8 – A2C2 _________________________________________ (A2C2 Route and Information (Ingress/Egress Route))
LINE 9 – ENEMY ADA ___________________________________ (Probability of Enemy ADA)
LINE 10 – TARGET ______________________________________ (Target Location and Information for Planning)
LINE 11 – LOAD ________________________________________ (Estimated Load Requirements (Slings/Type of Ammunition))
LINE 12 – POC _________________________________________ (POC of Requesting Unit for Coordination)
LINE 13 – POC AT PZ/LD________________________________ (POC at Pickup Zone or LD)
LINE 14 – POC AT LZ _____________________________________ (Unit Requesting POC at LZ)

**Continued on next page.
TITLE: AVIATION (ARMY ROTARY WING) MISSION/SUPPORT REQUEST [AVIAREQ] (CONTINUED)
REPORT NUMBER: A085

LINE 15 – FARP____________________________________________ (Suggested FARP Locations Within Supported Area)

LINE 16 – REMARKS _______________________________________ (Remarks with Safety Risk Assessment)

LINE 17 – WEATHER________________________________________ (Aviation Weather Forecast Within Supported Areas)

LINE 18 – NARRATIVE _______________________________________ (Free Text for Additional Information Required for Clarification of Report)

LINE 19 – AUTHENTICATION _________________________________ (Report Authentication)
TITLE: BASIC WIND DATA MESSAGE [BWD]
REPORT NUMBER: B001 {USMTF # C508}

GENERAL INSTRUCTIONS: Use to report wind direction and speed in 2,000 meter increments from the surface of the earth to an altitude of 30,000 meters. Reference: FM 34-81.

LINE 1 – DATE AND TIME __________________________ (DTG)
LINE 2 – UNIT _________________________________ (Unit Making Report)
LINE 3 – TIME OF MEASUREMENT ___________________ (DTG of Measurement)
LINE 4 – AREA ________________________________ (Area of Validity)
LINE 5 – LAYER MIKE _______________________________ (Layer Indicator, Downwind Direction in Degrees True, and Wind Speed in Kilometers per Hour or Knots)
LINE 6 – NARRATIVE _______________________________ (Free Text for Additional Information Required for Clarification of Report)
LINE 7 – AUTHENTICATION __________________________ (Report Authentication)
GENERAL INSTRUCTIONS: Use to provide a timely and accurate estimate of damage resulting from the application of military force, either lethal or non-lethal, against a predetermined objective. Reference: FM 9-43-1.

LINE 1 – DATE AND TIME ____________________________ (DTG)

LINE 2 – UNIT ____________________________________ (Unit Making Report)

LINE 3 – NAME_____________________________________ (Target or Installation Name)

LINE 4 – COUNTRY CODE ____________________________ (Two-Letter Country Code)

LINE 5 – BEN______________________________________ (Basic Encyclopedia Number, NA or UNKNOWN)

LINE 6 – LOCATION __________________________________ (UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator)

LINE 7 – TM REF ____________________________________ (Target Material Reference)

LINE 8 – PAGE NO.__________________________________ (Page or Sheet Number)

LINE 9 – COLLECTION DATE/TIME ______________________ (IMINT Collection DTG)

LINE 10 – TYPE____________________________________ (Type of IMINT)

LINE 11 – QUALITY__________________________________ (Image Quality – GOOD/FAIR/POOR)

LINE 12 – ANGLE____________________________________ (Viewing Angle – VERTICAL or OBLIQUE)

LINE 13 – TOT______________________________________ (Time Over Target for Attack DTG)

LINE 14 – DELIVERY SYSTEM __________________________ (Number and Type of Delivery System)

LINE 15 – WEAPONS_________________________________ (Number and Type of Weapons and Fusing)

LINE 16 – AIM POINT NAME ___________________________ (Name or Description of Target Element)

**Continued on next page.**
TITLE: BATTLE DAMAGE ASSESSMENT REPORT [BDAREP] (CONTINUED)
REPORT NUMBER: B005 {USMTF # C104}

LINE 17 – LOCATION ________________________________ (UTM or Six-Digit Grid
Coordinate With MGRS Grid Zone Designator)

**Repeat lines 13 through 17 for multiple missions or sets of mission data. Assign sequential lines to succeeding iterations; for example, first iteration 13 through 17; second iteration 13a through 17a; third iteration 13b through 17b; and so on.

LINE 18 – BDA ANALYSIS ____________________________ (Narrative of Target Damage and Munitions Effects to Include: Element Name, Grid Reference, Physical Damage, Confidence Level, and Whether Reattack is Required)

LINE 19 – NARRATIVE ________________________________ (Free Text for Additional Information Required for Clarification of Report)

LINE 20 – AUTHENTICATION __________________________ (Report Authentication)
TITLE: BED AVAILABILITY AND ELEMENT STATUS [BEDAVAIL]
REPORT NUMBER: B010 {USMTF # B913}

GENERAL INSTRUCTIONS: Use to report bed availability and medical treatment element (MTE) status when MEDSITREP record message is not or can not be used. Reference: FM 8-10-5.

LINE 1 – DATE AND TIME ____________________________ (DTG)
LINE 2 – UNIT _____________________________________ (Unit Making Report)
LINE 3 – ELEMENT ________________________________ (Name or Designator of the Reporting Element)
LINE 4 – TOTAL OPERATIONAL_______________________ (Total Number of Beds That Are Operational)
LINE 5 – MEDICAL OPERATIONAL ____________________ (Number of Medical (MM) Beds Operational)
LINE 6 – PSYCHIATRIC OPERATIONAL ________________ (Number of Psychiatric (MP) Beds Operational)
LINE 7 – GENERAL OPERATIONAL _____________________ (Number of General Surgeries (SS) Beds Operational)
LINE 8 – ORTHOPEDIC OPERATIONAL _________________ (Number of Orthopedic (SO) Beds Operational)
LINE 9 – BURN OPERATIONAL _________________________ (Number of Burn (SB) Beds Operational)
LINE 10 – SPINAL CORD OPERATIONAL _______________ (Number of Spinal Cord (SC) Injury Beds Operational)
LINE 11 – OB/GYN OPERATIONAL _____________________ (Number of OB/GYN (SG) Beds Operational)
LINE 12 – PEDIATRIC OPERATIONAL ________________ (Number of Pediatric (MC) Beds Operational)
LINE 13 – NEURO OPERATIONAL _____________________ (Number of Neurosurgery (SSN) Beds Operational)
LINE 14 – ORAL OPERATIONAL ________________________ (Number of Oral/Maxillofacial (SSM) Operational)

**Continued on next page.
TITLE: BED AVAILABILITY AND ELEMENT STATUS [BEDAVAIL] (CONTINUED)
REPORT NUMBER: B010 {USMTF # B913}

LINE 15 – OPHTHALMOLOGY OPERATIONAL ________________ (Number of Ophthalmology (SSO) Beds Operational)

LINE 16 – THORACIC OPERATIONAL ________________ (Number of Thoracic Surgery (SSC) Beds Operational)

**Use lines 13 through 16 to report the number of operational beds in selected surgical sub-specialties. Include these numbers in line 6.

LINE 17 – AVAILABLE TOTAL ______________________________ (Total Number of Available Beds)

LINE 18 – AVAILABLE MEDICAL ____________________________ (Number of Medical (MM) Beds Available)

LINE 19 – AVAILABLE PSYCHIATRIC ________________________ (Number of Psychiatric (MP) Beds Available)

LINE 20 – AVAILABLE GENERAL ___________________________ (Number of General Surgery (SS) Beds Available)

LINE 21 – AVAILABLE ORTHOPEDIC ________________________ (Number of Orthopedic (SO) Beds Available)

LINE 22 – AVAILABLE BURN _______________________________ (Number of Burn (SB) Beds Available)

LINE 23 – AVAILABLE SPINAL CORD ________________________ (Number of Spinal Cord (SC) Injury Beds Available)

LINE 24 – AVAILABLE OB/GYN _____________________________ (Number of OB/GYN (SG) Beds Available)

LINE 25 – AVAILABLE PEDIATRIC __________________________ (Number of Pediatric (MC) Beds Available)

**Use lines 17 through 25 to report the number of available beds for patients at the reporting medical element.

LINE 26 – AVAILABLE NEURO _____________________________ (Number of Neurosurgery (SSN) Available)

LINE 27 – AVAILABLE ORAL _______________________________ (Number of Oral/Maxillofacial (SSM) Beds Available)

**Continued on next page.
TITLE: BED AVAILABILITY AND ELEMENT STATUS [BEDAVAIL] (CONTINUED)
REPORT NUMBER: B010 {USMTF # B913}

LINE 28 – AVAILABLE OPHTHALMOLOGY ___________________ (Number of Ophthalmology (SSO) Beds Available)

LINE 29 – AVAILABLE THORACIC___________________________ (Number of Thoracic Surgery (SSC) Beds Available)

**Use lines 26 through 29 to report the number of available beds in selected surgical sub-specialties. Include these numbers in line 19.

LINE 30 – SUITES __________________________________________ (Number of Operating Suites That Are Operational)

LINE 31 – BACKLOG ________________________________________ (Number of Hours Surgical Backlog)

LINE 32 – OVERFLOW______________________________________ (Number of Overflow/Holding Beds Available)

LINE 33 – NARRATIVE _____________________________________ (Free Text for Additional Information Required for Clarification of Report)

**Use lines 30 through 33 to provide additional information concerning medical element status, workload, and other amplifying data.

**Repeat lines 3 through 33 for multiple missions or sets of mission data. Assign sequential line numbers to succeeding iterations; for example, first iteration 11 through 15; second iteration 11a through 15a; third iteration 11b through 15b; and so on.

LINE 34 – AUTHENTICATION _______________________________ (Report Authentication)
GENERAL INSTRUCTIONS: Use to report bed availability and medical treatment element (MTE) status when the MEDREGREP record message cannot be used. Reference: FM 8-10-5.

<table>
<thead>
<tr>
<th>LINE 1 – DATE AND TIME</th>
<th>(DTG)</th>
</tr>
</thead>
<tbody>
<tr>
<td>LINE 2 – UNIT</td>
<td>(Unit Making Report)</td>
</tr>
<tr>
<td>LINE 3 – EVAC FROM</td>
<td>(Name or Designator of MTE From Which to Move/Evacuate Patients)</td>
</tr>
<tr>
<td>LINE 4 – PICKUP</td>
<td>(UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator of PICKUP or Location of MTE From Which Evacuated. Report Only if Other Than Fixed-Wing Aeromedical Evacuation (AE) Will be Used and Transporting Agency May Not Know the PICKUP Location)</td>
</tr>
<tr>
<td>LINE 5 – EVAC TO</td>
<td>(Name or Designator of Destination MTE)</td>
</tr>
<tr>
<td>LINE 6 – DELIVERY</td>
<td>(Delivery Location or Location of Destination MTE, UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator)</td>
</tr>
<tr>
<td>LINE 7 – NO. MEDICAL (MM)</td>
<td>(Number of MM Beds Assigned to Patients at Destination MTE)</td>
</tr>
<tr>
<td>LINE 8 – NO. PSYCHIATRIC (MP)</td>
<td>(Number of MP Beds Assigned to Patients at Destination MTE)</td>
</tr>
<tr>
<td>LINE 9 – NO. SURGERY (SS)</td>
<td>(Number of SS Beds Assigned to Patients at Destination MTE)</td>
</tr>
<tr>
<td>LINE 10 – NO. ORTHOPEDIC (SO)</td>
<td>(Number of SO Beds Assigned to Patients at Destination MTE)</td>
</tr>
<tr>
<td>LINE 11 – NO. BURN (SB)</td>
<td>(Number of SB Beds Assigned to Patients at Destination MTE)</td>
</tr>
</tbody>
</table>

***Continued on next page.***
TITLE: BED DESIGNATIONS [BEDDESIG] (CONTINUED)
REPORT NUMBER: B015 {USMTF # A913}

LINE 12 – NO. SPINAL CORD (SC) ___________________________ (Number of SC Beds Assigned to Patients at Destination MTE)

LINE 13 – NO. OB/GYN (SG) _______________________________ (Number of SG Beds Assigned to Patients at Destination MTE)

LINE 14 – NO. PEDIATRIC (MC) ______________________________ (Number of MC Beds Assigned to Patients at Destination MTE)

LINE 15 – TOTAL _________________________________________ (Total Number of Beds Assigned to Patients at Destination MTE)

LINE 16 – NO. NEURO (SSN) ________________________________ (Number of SSN Beds Assigned to Patients at Destination MTE)

LINE 17 – NO. MAXILLO (SSM)______________________________ (Number of SSM Beds Assigned to Patients at Destination MTE)

LINE 18 – NO. OPHTHALMOLOGY (SSO) _____________________ (Number of SSO Beds Assigned to Patients at Destination MTE)

LINE 19 – NO. THORACIC (SSC) _____________________________ (Number of SSC Beds Assigned to Patients at Destination MTE)

**Use lines 16 through 19 to report the number of beds assigned to patients in selected surgical subspecialties. Include these numbers in line 8.

LINE 20 – CATEGORY______________________________________ (Number of Special Category Patients (Other Than Active Duty US Armed Forces) Assigned Beds at Destination MTE by Medical Specialty Category (EXAMPLE: 2 French Nationals in Category SO. The Number of Patients Reported is Also Included in Lines 6 to 14))

LINE 21 – NARRATIVE _____________________________________ (Free Text for Additional Information Required for Clarification of Report)

**Continued on next page.
**Repeat lines 3 through 21 for multiple missions or sets of mission data. Assign sequential line numbers to succeeding iterations; for example, first iteration 3 through 21; second iteration 3a through 21a; third iteration 3b through 21b; and so on.

LINE 22 – AUTHENTICATION ________________________________ (Report Authentication)

**Use lines 20 through 22 to provide additional medical information and other amplifying data.
 FM 101-5-2

TITLE: BED REQUEST [BEDREQ]
REPORT NUMBER: B020 {USMTF # C913}

GENERAL INSTRUCTIONS: Use to request beds for patients when the medical group record can not be used. Reference: FM 8-10-5.

LINE 1 – DATE AND TIME __________________________ (DTG)
LINE 2 – UNIT ______________________________ (Unit Making Report)
LINE 3 – REQUESTOR ____________________________ (Name or Designator of Requesting Element With Patients Requiring Beds)
LINE 4 – LOCATION ______________________________ (UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator. Report Only on First Report or Upon Relocation)
LINE 5 – PATIENTS ______ HYPHEN _____ TOTAL _____ (Number of Litter (After PATIENTS), Ambulatory (After HYPHEN), and All (After TOTAL) Patients Requiring Beds)
LINE 6 – MEDICAL (MM) ______ HYPHEN _____ TOTAL _____ (Number of Litter (After MM), Ambulatory (After HYPHEN), and All (After TOTAL) MM Requiring Beds)
LINE 7 – PSYCHIATRIC (MP) ____ HYPHEN _____ TOTAL _____ (Number of Litter (After MP), Ambulatory (After HYPHEN), and All (After TOTAL) MP Requiring Beds)
LINE 8 – SURGERY (SS) _______ HYPHEN _____ TOTAL _____ (Number of Litter (After SS), Ambulatory (After HYPHEN), and All (After TOTAL) SS Requiring Beds)
LINE 9 – ORTHOPEDIC (SO) ____ HYPHEN _____ TOTAL _____ (Number of Litter (After SO), Ambulatory (After HYPHEN), and All (After TOTAL) SO Requiring Beds)

**Continued on next page.**
TITLE: BED REQUEST [BEDREQ] (CONTINUED)
REPORT NUMBER: B020 [USMTF # C913]

LINE 10 – BURN (SB) ___________ HYPHEN ______ TOTAL ______ (Number of Litter (After SB), Ambulatory (After HYPHEN), and All (After TOTAL) SB Requiring Beds)

LINE 11 – SPINAL CORD (SC) ___ HYPHEN ______ TOTAL ______ (Number of Litter (After SC), Ambulatory (After HYPHEN), and All (After TOTAL) SC Requiring Beds)

LINE 12 – OB/GYN (SG) ________ HYPHEN ______ TOTAL ______ (Number of Litter (After SG), Ambulatory (After HYPHEN), and All (After TOTAL) SG Requiring Beds)

LINE 13 – PEDIATRIC (MC) ____ HYPHEN ______ TOTAL ______ (Number of Litter (After MC), Ambulatory (After HYPHEN), and All (After TOTAL) MC Requiring Beds)

LINE 14 – NEURO (SSN) _______ HYPHEN ______ TOTAL ______ (Number of Litter (After SSN), Ambulatory (After HYPHEN), and All (After TOTAL) SSN Requiring Beds)

LINE 15 – MAXILLO (SSM) _____ HYPHEN ______ TOTAL ______ (Number of Litter (After SSM), Ambulatory (After HYPHEN), and All (After TOTAL) SSM Requiring Beds)

LINE 16 – OPHTHAL (SSO) _____ HYPHEN ______ TOTAL ______ (Number of Litter (After SSO), Ambulatory (After HYPHEN), and All (After TOTAL) SSO Requiring Beds)

LINE 17 – THORACIC (SSC) _____ HYPHEN ______ TOTAL ______ (Number of Litter (After SSC), Ambulatory (After HYPHEN), and All (After TOTAL) SSC Requiring Beds)

**Use lines 14 through 17 to report the number of patients requiring beds in selected surgical sub-specialties. Include these numbers in line 8. Assign sequential line numbers to succeeding iterations; for example, first iteration 14 through 16; second iteration 14a through 17a; third iteration 14b through 17b; and so on.

**Continued on next page.
TITLE: BED REQUEST [BEDREQ] (CONTINUED)
REPORT NUMBER: B020 {USMTF # C913}

LINE 18 – CATEGORY ______________________________________ (Number of Special Category Patients (Other Than Active Duty US Armed Forces) Assigned Beds at Destination MTE by Medical Specialty Category (EXAMPLE: 2 French Nationals))

LINE 19 – PICKUP ________________________________________ (Pickup Location in UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator)

LINE 20 – ONLOAD _________ HYPHEN _____ TOTAL _____ (Number of Litter (After ONLOAD), Ambulatory (After HYPHEN), and All (After TOTAL) Patients to be Picked Up)

LINE 21 – EQUIPMENT _____________________________________ (Special Medical Equipment Required)

LINE 22 – NARRATIVE _____________________________________ (Free Text for Additional Information Required for Clarification of Report)

**Repeat lines 19-22 as a group to identify patient pickup location and time available for movement when involving more than one location and time. Assign sequential line numbers to succeeding iterations; for example, first iteration 19 through 21; second iteration 19a through 21a; third iteration 19b through 21b; and so on.

**Repeat lines 3 through 22 as a group for each MTE requesting beds when reporting for more than one MTE. Assign sequential line numbers to succeeding iterations; for example, first iteration 2 through 22; second iteration 2a through 22a; third iteration 2b through 22b; and so on.

LINE 23 – AUTHENTICATION _______________________________ (Report Authentication)
TITLE: BLOOD SHIPMENT REPORT [BLDSHIPREP]
REPORT NUMBER: B025 {USMTF # B911}


LINE 1 – DATE AND TIME ________________________________ (DTG)

LINE 2 – UNIT ________________________________ (Unit Making Report)

LINE 3 – ACTIVITY ________________________________ (Reporting Unit’s Activity Code Letter:
A = Joint Blood Program Office
B = Area Joint Blood Program Office
C = Armed Services Whole Blood Processing Laboratory
D = Blood Donor Center
E = Blood Products Depot
F = Blood Transshipment Center
G = Blood Supply Unit
H = Medical Treatment Element
I = Naval Vessel)

LINE 4 – LOCATION ________________________________ (UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator)

LINE 5 – RENDEVOUS ________________________________ (NAVAL VESSELS ONLY: UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator for Delivery of Blood Products)

LINE 6 – ARRIVAL ________________________________ (NAVAL VESSELS ONLY (Hospital Ship): Estimated DTG at the Projected Location)

LINE 7 – PRODUCT ________________________________ (Brevity Code Letter of Blood Product Being Shipped:
J = Red Blood Cells
K = Whole Blood
L = Frozen Red Blood Cells
M = Fresh Frozen Plasma
N = Frozen Platelets)

LINE 8 – O POSITIVE ________________________________ (Number of Units)

**Continued on next page.
TITLE: BLOOD SHIPMENT REPORT [BLDSHIPREP] (CONTINUED)
REPORT NUMBER: B025 {USMTF # B911}

LINE 9 – O NEGATIVE______________________________ (Number of Units)
LINE 10 – A POSITIVE______________________________ (Number of Units)
LINE 11 – A NEGATIVE______________________________ (Number of Units)
LINE 12 – B POSITIVE______________________________ (Number of Units)
LINE 13 – B NEGATIVE______________________________ (Number of Units)
LINE 14 – AB POSITIVE____________________________ (Number of Units)
LINE 15 – AB NEGATIVE____________________________ (Number of Units)
LINE 16 – TOTAL __________________________________ (Total Number of Units of Blood Product Being Shipped)

**Repeat lines 7 through 16 as a group when shipping more than one blood product. Assign sequential line numbers to succeeding iterations; for example, first iteration 7 through 16; second iteration 7a through 16a; third iteration 7b through 16b; and so on.

LINE 17 – CONTROL ________________________________ (Airbill Number or Transportation Control Number (TCN))
LINE 18 – MISSION ________________________________ (Airline and Flight Number or Mission Number Assigned at the Shipment's Origin)
LINE 19 – ARRIVAL ________________________________ (Estimated DTG of Shipment's Arrival at Destination)
LINE 20 – BOXES ________________________________ (Number of Boxes in Shipment)
LINE 21 – CONTACT ________________________________ (Name of Shipper's Point of Contact)
LINE 22 – PHONE ________________________________ (24-Hour Telephone Number of Shipper's Point of Contact)
LINE 23 – NARRATIVE ________________________________ (Free Text for Additional Information Required for Clarification of Report)
LINE 24 – AUTHENTICATION ________________________________ (Report Authentication)
TITLE: BULK PETROLEUM ALLOCATION [POLALOT]
REPORT NUMBER: B030 {USMTF # A860}


LINE 1 – DATE AND TIME ________________________________ (DTG)
LINE 2 – UNIT ________________________________________ (Unit Making Report)
LINE 3 – COMMAND ___________________________________ (Identifier of Component Command)
LINE 4 – FUEL TYPE ___________________________________ (Type of Fuel Being Allocated)
LINE 5 – ALLOCATION _________________________________ (Quantity and Unit of Measurement for Fuel Allocated)
LINE 6 – DELIVERY METHOD _____________________________ (Method in Which POL is Delivered)
LINE 7 – LOCATION ____________________________________ (UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator)

**Repeat lines 3 through 7 to indicate the component command, fuel type, and quantity allocated. Assign sequential line numbers to succeeding iterations; for example, first iteration 3 through 7; second iteration 3a through 7a; third iteration 3b through 7b, and so on.

LINE 8 – NARRATIVE ___________________________________ (Free Text for Additional Information Required for Clarification of Report)

LINE 9 – AUTHENTICATION ______________________________ (Report Authentication)
TITLE: BULK PETROLEUM CONTINGENCY REPORT [REPOL]
REPORT NUMBER: B035 {USMTF # B876}

GENERAL INSTRUCTIONS: Use (1) to report loss of major bulk petroleum and (2) to request bulk petroleum products. Reference: FM 63-20 and FM 63-11.

LINE 1 – DATE AND TIME _______________________________ (DTG)

LINE 2 – UNIT ___________________________________________ (Unit Making Report)

LINE 3 – NAME____________________________________________ (Name of Damaged Facility)

LINE 4 – LEVEL ___________________________________________ (Level of Damage)

LINE 5 – REPAIRS _________________________________________ (Estimated Date Repairs Will be Completed, DTG)

**Repeat lines 3 through 5 to report more than one facility. Assign sequential line numbers to succeeding iterations; for example, first iteration 3 through 5; second iteration 3a through 5a; third iteration 3b through 5b; and so on.

LINE 6 – ASSESSMENT ______________________________________ (Assessment of Impact of Damage)

LINE 7 – ACTIVITY ________________________________________ (Name of Activity Reporting Products on Hand)

LINE 8 – PRODUCT ________________________________________ (Type of Petroleum Product Being Reported)

LINE 9 – INVENT __________________________________________ (On-Hand Inventory of Product Thousands of Barrels (MBBLs))

LINE 10 – CAPACITY_______________________________________ (Storage Capacity in MBBLs)

LINE 11 – DAYS ___________________________________________ (Days of Combat Support (DOS) for the Product)

**Repeat lines 7 through 11 to report more than one facility. Assign sequential line numbers to succeeding iterations; for example, first iteration 6 through 10; second iteration 6a through 10a; third iteration 6b through 10b; and so on.

LINE 12 – TYPE____________________________________________ (Type of Petroleum Product)

LINE 13 – INVENT _________________________________________ (On-Hand Inventory in Thousands of Barrels (MBBLs))

**Continued on next page.
TITLE: BULK PETROLEUM CONTINGENCY REPORT [REPOL] (CONTINUED)
REPORT NUMBER: B035 {USMTF # B876}

LINE 14 – CAPACITY _________________________________________ (Usable Storage Capacity in MBBLs)

LINE 15 – DAYS ___________________________________________ (Days of Combat Support (DOS) of Petroleum Products on Hand)

**Repeat lines 12 through 15 to report more than one facility. Assign sequential line numbers to succeeding iterations; for example, first iteration 12 through 15; second iteration 12a through 15a; third iteration, 12b through 15b; and so on.

LINE 16 – DISCHARGE PORT ________________________________ (Name of Discharge Port Being Reported)

LINE 17 – PRODUCT _______________________________________ (Type of Petroleum Product Being Reported)

LINE 18 – BARRELS _________________________________________ (Quantity of Petroleum Product in Thousands of Barrels (MBBLs))

LINE 19 – PERIOD _________________________________________ (Period in Which Delivery is Required)

**Repeat lines 16 through 19 to report more than one facility. Assign sequential line numbers to succeeding iterations; for example, first iteration 16 through 19; second iteration 16a through 19a; third iteration 16b through 19b; and so on.

LINE 20 – DAMAGED PORT _________________________________ (Name of Damaged Port)

LINE 21 – DAMAGE ________________________________________ (Level of Damage)

LINE 22 – UNLOAD _________________________________________ (Unloading Capacity of Damaged Port in Thousands of Barrels (MBBLs))

**Repeat lines 20 through 22 to report more than one facility. Assign sequential line numbers to succeeding iterations; for example, first iteration 20 through 22; second iteration 20a through 22a; third iteration 20b through 22b; and so on.

LINE 23 – NARRATIVE _____________________________________ (Free Text for Additional Information Required for Clarification of Report)

LINE 24 – AUTHENTICATION _________________________________ (Report Authentication)
TITLE: BULK PETROLEUM REQUIREMENTS FORECAST [POLRQMT]
REPORT NUMBER: B040 {USMTF # D869}


LINE 1 – DATE AND TIME ________________________________ (DTG)
LINE 2 – UNIT ________________________________ (Unit Making Report)
LINE 3 – STATUS ________________________________ (Status of Bulk Fuel on Hand to Include Type, Gallons on Hand, Days of Supply on Hand, and Gallons Received Since Last Reported)

<table>
<thead>
<tr>
<th>TYPE</th>
<th>ON HAND</th>
<th>DAYS</th>
<th>RECEIVED</th>
</tr>
</thead>
<tbody>
<tr>
<td>_____</td>
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</tbody>
</table>

LINE 4 – FROM ____________________________________________ (DTG Beginning of Period Covered by Requirement)
LINE 5 – TO _______________________________________________ (DTG End of Period Covered by Requirement)
LINE 6 – RECEIVING UNIT__________________________________ (Designation of the Receiving Unit)
LINE 7 – LOCATION _______________________________________ (UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator)

**Repeat lines 5 through 7 to indicate other locations, receiving unit designations, and specific requirements for the period shown in line 4. Assign sequential line numbers to succeeding iterations; for example, first iteration 5 through 7; second iteration 5a through 7a; third iteration 5b through 7b, and so on.

**Continued on next page.
TITLE: BULK PETROLEUM REQUIREMENTS FORECAST [POLRQMT] (CONTINUED)
REPORT NUMBER: B040 {USMTF # D869}

LINE 8 – REQUIREMENT ________________________________ (Bulk Fuel Requirement to Include Type, Quantity in Gallons, Transportation Mode Desired, and Priority)

<table>
<thead>
<tr>
<th>TYPE</th>
<th>QUANTITY</th>
<th>MODE</th>
<th>PRIORITY</th>
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</tbody>
</table>

LINE 9 – DAMAGE ________________________________ (Description of Damage to Bulk Petroleum Facilities and Equipment, to Include Changes in Previous Damage)

LINE 10 – NARRATIVE ________________________________ (Free Text for Additional Information Required for Clarification of Report)

LINE 11 – AUTHENTICATION ________________________________ (Report Authentication)
GENERAL INSTRUCTIONS: Use to report a periodic update or formal request of fuel unit requirements. Send as needed with ROUTINE precedence on A&L nets. Reference: FM 63-20 and FM 63-11.

LINE 1 – DATE AND TIME ________________________________ (DTG)

LINE 2 – UNIT _________________________________________ (Unit Making Report)

LINE 3 – REQUEST ______________________________________ (Request or Forecast (Include DTG))

LINE 4 – FUEL TYPE ______________________________________ (Type Fuel)  a) Diesel
                                              b) MOGAS
                                              c) JP - 4
                                              d) JP - 8

LINE 5 – QTY OH __________________________________________ (Specify Gallons or Liters)

LINE 6 – QTY REQ _________________________________________ (Required Quantity)

LINE 7 – NARRATIVE ______________________________________ (Free Text for Additional Information Required for Clarification of Report)

LINE 8 – AUTHENTICATION ________________________________ (Report Authentication)
TITLE: CEMETERY STATUS [CEMSTAT]
REPORT NUMBER: C001 {USMTF # D960}

GENERAL INSTRUCTIONS: Use to provide data concerning the creation or disposition of temporary cemeteries. Reference: FM 10-286 and FM 10-297.

LINE 1 – DATE AND TIME ________________________________ (DTG)
LINE 2 – UNIT ________________________________ (Unit Making Report)
LINE 3 – NAME ________________________________ (Name or Title of Cemetery)
LINE 4 – OPENED ________________________________ (DTG Cemetery Opened)
LINE 5 – COORDINATES ________________________________ (UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator)
LINE 6 – TOWN NAME ________________________________ (Name of the Town, Village, or City Nearest the Cemetery)
LINE 7 – ROAD NUMBER ________________________________ (Cemetery Access Road Number)
LINE 8 – ROAD NAME ________________________________ (Name of Access Road to Cemetery Site)
LINE 9 – CAPACITY ________________________________ (Total Capacity of Cemetery)
LINE 10 – REMAINING CAPACITY ________________________________ (Unused Capacity of the Cemetery)
LINE 11 – DISTANCE ________________________________ (Distance in Feet Between Grave Reference: Marks)
LINE 12 – WIDTH ________________________________ (Width in Feet of the Cemetery Access Road)
LINE 13 – SECURITY TYPE ________________________________ (Security Type Provided at the Cemetery)

**Repeat lines 3 through 13 to report data on multiple temporary cemeteries. Assign sequential line numbers to succeeding iterations; for example, first iteration, 3 through 13; second iteration, 3a through 13a; third iteration, 3b through 13b; and so on.

LINE 14 – CEMETERY NAME ________________________________ (Name or Title of the Cemetery That Was Closed)

**Continued on next page.
TITLE: CEMETERY STATUS [CEMSTAT] (CONTINUED)
REPORT NUMBER: C001 {USMTF # D960}

LINE 15 – COORDINATES ___________________________________ (Coordinates of the Cemetery as Closed)
   a. ____________________________________________
   b. ____________________________________________
   c. ____________________________________________
   d. ____________________________________________

LINE 16 – DATE CLOSED ___________________________________ (DTG Cemetery Was Closed)

LINE 17 – QUANTITY BY CATEGORY ________________________ (Quantity of Remains by Personnel Category at the Cemetery That Was Closed)

**Repeat lines 14 through 17 to indicate the closing of multiple temporary cemeteries. Assign sequential line numbers to succeeding iterations; for example, first iteration 14 through 17; second iteration 14a through 17a; third iteration 14b through 17b; and so on.

LINE 18 – NAME ___________________________________________ (Name of Cemetery That Was Cleared)

LINE 19 – LOCATION_______________________________________ (UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator of the Cemetery Cleared)

LINE 20 – DATE CLEARED __________________________________ (DTG Cemetery Was Cleared)

LINE 21 – LAND CONDITION ________________________________ (Enter RESTORED or NOT RESTORED)

**Repeat lines 18 through 21 to indicate the clearing of multiple temporary cemeteries. Assign sequential line numbers to succeeding iterations; for example, first iteration 18 through 21; second iteration 18a through 21a; third iteration 18b through 21b; and so on.

LINE 22 – ON HAND ________________________________________ (Count of Remains on Hand at Beginning of Report Period)

LINE 23 – RECEIVED _______________________________________ (Count of Remains Received During Period)

**Continued on next page.
TITLE: CEMETERY STATUS [CEMSTAT] (CONTINUED)
REPORT NUMBER: C001 {USMTF # D960}

LINE 24 – TRANSFERRED _____________________________ (Count of Remains Transferred During Period)

LINE 25 – AWAITING TRANSFER ______________________ (Count of Remains Awaiting Transfer at End of Period)

LINE 26 – BURIED _________________________________ (Count of Remains Buried During Period, if Applicable)

LINE 27 – AWAITING BURIAL _________________________ (Count of Remains Awaiting Burial at End of Period, if Applicable)

**Repeat lines 22 through 27 to indicate multiple reports of remains transferred and buried. Assign sequential line numbers to succeeding iterations; for example, first iteration 22 through 27; second iteration 22a through 27a; third iteration 22b through 27b; and so on.

LINE 28 – NARRATIVE ______________________________ (Free Text for Additional Information Required for Clarification of Report)

LINE 29 – AUTHENTICATION _________________________ (Report Authentication)
**TITLE: CHAPLAIN’S REPORT/UNIT MINISTRY TEAM DAILY LINE REPORT [CHPREP]**

**REPORT NUMBER: C005**

**GENERAL INSTRUCTIONS:** Use to convey UMT status and general assessment of unit morale by unit chaplain. Send as directed by commander. Reference: FM 16-1.

**LINE 1 – DATE AND TIME ___________________________ (DTG)**

**LINE 2 – UNIT _________________________________ (Unit Making Report)**

**LINE 3 – UMT STATUS ____________________________ ((Strength) Omit if green)**

<table>
<thead>
<tr>
<th>a. RED</th>
<th>b. AMBER</th>
<th>c. GREEN</th>
</tr>
</thead>
<tbody>
<tr>
<td>UMT Loss</td>
<td>Chap or Asst. Loss</td>
<td>UMT up, Mission Capable</td>
</tr>
</tbody>
</table>

**LINE 4 – DENOMINATIONAL NEEDS**

<table>
<thead>
<tr>
<th>a. Protestant</th>
<th>b. Roman Catholic</th>
<th>c. Jewish</th>
<th>d. Orthodox</th>
<th>e. Islamic</th>
<th>f. Buddhist</th>
<th>g. Other</th>
</tr>
</thead>
</table>

**LINE 5 – UNIT RELIGIOUS ACTIVITY NUMBERS**

**a. Religious Services**

|---------------|-------------------|-----------|-------------|-----------|------------|--------|

**b. Rites, Sacraments, Ordinances**

<table>
<thead>
<tr>
<th>1. Baptism</th>
<th>2. Communion</th>
<th>3. Last Rites</th>
<th>4. Other</th>
</tr>
</thead>
</table>

**c. Pastoral Care**

|---------------|-----------------|-------------------------------|---------------------------|---------------------|--------|

**Continued on next page.**
d. Religious and Humanitarian Support
   1. Stability Operations
      a. Civil Affairs _________________________________
      b. Noncombatant Evac ___________________________
      c. Peace Operations _____________________________
      d. Disaster Relief ______________________________
      e. Other ______________________________________ (Specify)
   2. Supporting Operations
      a. Humanitarian Assistance ______________________
      b. Environmental Assistance _____________________
      c. Other _____________________________________ (Specify)

LINE 6 – UMT ASSESSMENT ________________________________ (Assessment of Morale, Upcoming Mission, and so forth (if essential))

LINE 7 – NARRATIVE ________________________________ (Free Text for Additional Information Required for Clarification of Report)

LINE 8 – AUTHENTICATION ______________________________ (Report Authentication)
GENERAL INSTRUCTIONS: Use to transmit warning of potential chemical hazard from a biological or chemical attack. Send as necessary. Reference: ATP-45(A) and FM 3-3.

LINE 1 – AREA OF VALIDITY _______________________________ (NBC event)

LINE 2 – DATE AND TIME ________________________________ (DTG)

LINE 3 – UNIT _____________________________________________ (Unit Making Report)

LINE 4 – WINDS ___________________________________________ (DTG Winds Were Measured)

LINE 5 – FORECAST _______________________________________ (DTG Forecast Begins)

LINE 6 – AO _____________________________________________ (Area of Operation Affected)

LINE 7 – DIRECTION _______________________________________ (Downwind Direction)

LINE 8 – WIND SPEED______________________________________ (Wind Speed in K/MPH)

LINE 9 – AIR STABILITY ___________________________________ (Air Stability Category:
1 = Very Unstable (U)
2 = Unstable (U)
3 = Slightly Unstable (U)
4 = Neutral (N)
5 = Slightly Stable (S)
6 = Stable (S)
7 = Very Stable (S))

LINE 10 – TEMPERATURE ________________________________ (Temperature Code:
CODE  TEMPERATURE
05  5 DEG C
04  4 DEG C
03  3 DEG C
02  2 DEG C
01  1 DEG C
00  0 DEG C
51  -1 DEG C
52  -2 DEG C
53  -3 DEG C
54  -4 DEG C
55  -5 DEG C
56  -6 DEG C)

**Continued on next page.
TITLE: CHEMICAL DOWNWIND REPORT (CDM) [CDMREP] (CONTINUED)

REPORT NUMBER: C010

LINE 11 – HUMIDITY_______________________________________ (Humidity Code:
0 = 0-9%
1 = 10-19%
2 = 20-29%
3 = 30-39%
4 = 40-49%
5 = 50-59%
6 = 60-69%
7 = 70-79%
8 = 80-89%
9 = 90-100%)

LINE 12 – WEATHER _______________________________________ (Significant Weather Phenomena Code:
3 = Blowing Snow and Sand
4 = Fog, Ice Fog, or Thick Haze
5 = Drizzle
6 = Rain
7 = Light Rain or Snow
8 = Showers of Rain, Hail or a Mixture
9 = Thunderstorms
(-) = No Significant Phenomena)

LINE 13 – CLOUD COVER___________________________________ (Cloud Cover Code)

**Repeat as necessary. Weather information valid for first two hours.

LINE 14 – NARRATIVE _____________________________________ (Free Text for Additional Information Required for Clarification of Report)

LINE 15 – AUTHENTICATION _______________________________ (Report Authentication)
GENERAL INSTRUCTIONS: Use to provide a status of the civil affairs and civilian-military cooperation and relations situation. Reference: FM 41-10.

LINE 1 – DATE AND TIME ________________________________ (DTG)
LINE 2 – UNIT ________________________________ (Unit Making Report)
LINE 3 – LIAISON ________________________________ (Establishment of and Changes in Liaison Arrangements Between Civil and Military)
LINE 4 – CONTROL ________________________________ (Establishment and Changes in Location, Status, Activity of Control Nodes and in the CMO AO)
LINE 5 – AREA OF OPERATIONS ____________________________ (CMO AO Name)
LINE 6 – US CIVILIANS ________________________________ (Total Number of US Civilians in AO)
LINE 7 – THIRD COUNTRY ________________________________ (Total Number of Third Country Civilians in AO)
LINE 8 – FOREIGN NATION ________________________________ (Total Number of Foreign Nation Civilians in AO)
LINE 9 – TOTAL CIVILIAN POPULATION _____________________ (Total Civilian Population in the AO)
LINE 10 – MALES UNDER 16 ________________________________ (Total Number of Dislocated Males Under 16 Years of Age)
LINE 11 – UNACCOMPANIED MALES UNDER 16 ______________ (Total Number of Dislocated Unaccompanied Males Under 16 Years of Age)
LINE 12 – MALES OVER 60 ________________________________ (Total Number of Dislocated Males Over 60 Years of Age)
LINE 13 – MARRIED MALES ________________________________ (Total Number of Dislocated Married Males)
LINE 14 – SINGLE MALES ________________________________ (Total Number of Dislocated Single Males)

**Continued on next page.**
TITLE: CIVIL-MILITARY OPERATIONS STATUS [CIVMILSTAT] (CONTINUED)
REPORT NUMBER: C015 {USMTF # B991}

LINE 15 – FEMALES UNDER 16 ______________________________ (Total Number of Dislocated Females Under 16 Years of Age)

LINE 16 – UNACCOMPANIED FEMALES UNDER 16 ____________ (Total Number of Dislocated Unaccompanied Females Under 16 Years of Age)

LINE 17 – FEMALES OVER 60 _______________________________ (Total Number of Females Over 60 Years of Age)

LINE 18 – MARRIED FEMALES ______________________________ (Total Number of Dislocated Married Females)

LINE 19 – SINGLE FEMALES ________________________________ (Total Number of Dislocated Single Females)

LINE 20 – DISLOCATED MALES _____________________________ (Total Number of Dislocated Males in AO)

LINE 21 – DISLOCATED FEMALES ___________________________ (Total Number of Dislocated Females in AO)

LINE 22 – TOTAL MALES AND FEMALES____________________ (Total Number of Dislocated Males And Females in AO)

LINE 23 – CONTROLLED ___________________________________ (Total Number of Dislocated Civilians in Controlled Movement)

LINE 24 – UNCONTROLLED________________________________ (Total Number of Dislocated Civilians in Uncontrolled Movement)

LINE 25 – MANPOWER _____________________________________ (Changes in Civilian Manpower Indicate Changes/Shortages in Labor Availability)

LINE 26 – PUBLIC ADMINISTRATION_________________________ (Changes in Capability to Continue Essential Functions)

LINE 27 – LEGAL _________________________________________ (Changes in Status of Legal Accommodations and Accords)

**Continued on next page.
TITLE: CIVIL-MILITARY OPERATIONS STATUS [CIVMILSTAT] (CONTINUED)

REPORT NUMBER: C015 {USMTF # B991}

LINE 28 – INTELLIGENCE __________________________ (Changes in Civilian Attitude; Identification of Collaborators, Agents, and Dissident Elements; Espionage, Sabotage, and Political Subversion)

LINE 29 – LAW AND ORDER __________________________ (Changes in Civilian Law and Order)

LINE 30 – PUBLIC HEALTH ____________________________ (Changes in Status of Public Health)

LINE 31 – SUPPLY _________________________________ (Changes in Status of Civilian Supplies)

LINE 32 – TRANSPORTATION _________________________ (Changes in Status of the Civil Transportation System)

LINE 33 – DRINKING WATER _________________________ (Water Potability Status; Potable, Local Only; Nonpotable; to US Standards, as Applicable)

LINE 34 – WATER PRODUCTION _____________________ (Adequacy of the Water Production Capability; Adequate, Not Adequate, or None, as Applicable)

LINE 35 – SEWAGE TREATMENT ______________________ (Status of Sewage Treatment; Adequate, Not Adequate, or None, as Applicable)

LINE 36 – REFUSE _________________________________ (Status of Refuse Collection Adequate, Not Adequate, or None as Applicable)

LINE 37 – RADIO _________________________________ (Status of the Radio Capability Using OPERATIONAL, NONOPERATIONAL, or UNKNOWN)

**Continued on next page.
## CIVIL-MILITARY OPERATIONS STATUS [CIVMILSTAT] (CONTINUED)

**REPORT NUMBER:** C015 {USMTF # B991}

**LINE 38 – TELEVISION**
(Status of the Television Capability Using OPERATIONAL, NONOPERATIONAL, or UNKNOWN)

**LINE 39 – NEWSPAPER**
(Status of the Newspaper Capability Using OPERATIONAL, NONOPERATIONAL, or UNKNOWN)

**LINE 40 – POSTAL**
(Status of the Postal Capability Using OPERATIONAL, NONOPERATIONAL, or UNKNOWN)

**LINE 41 – TELEPHONE**
(Status of the Telephone Capability Using OPERATIONAL, NONOPERATIONAL, or UNKNOWN)

**LINE 42 – TELEGRAPH**
(Status of the Telegraph Capability Using OPERATIONAL, NONOPERATIONAL, or UNKNOWN)

**LINE 43 – TELETYPE**
(Status of the Teletype Capability Using OPERATIONAL, NONOPERATIONAL, or UNKNOWN)

**LINE 44 – ELECTRIC NAVIGATION SYSTEM**
(Status of the Electric Navigation System Using OPERATIONAL, NONOPERATIONAL, or UNKNOWN)

**LINE 45 – WORD OF MOUTH**
(Status of Word of Mouth Communications Using OPERATIONAL, NONOPERATIONAL, or UNKNOWN)

**Continued on next page.**
TITLE: CLASS IV BULK BARRIER MATERIALS REQUEST [BLKIVREQ]
REPORT NUMBER: C020


LINE 1 – DATE AND TIME __________________________________ (DTG)
LINE 2 – UNIT _____________________________________________ (Unit Making Report)
LINE 3 – REQUEST TYPE ___________________________________ (Update, Forecast, or Request)
LINE 4 – MATERIALS ______________________________________ (Type) a) Pickets
______________________________________ b) Wire
______________________________________ c) Sand Bags
______________________________________ d) Wood Type/Size
LINE 5 – QTY OH __________________________________________ (Specify)
**Repeat as Required
LINE 6 – QTY REQ _________________________________________ (Required Quantity)
**Repeat as Required
LINE 7 – UOM _____________________________________________ (Unit of Measurement Times Number Requested)
LINE 8 – MOR _____________________________________________ (Method of Resupply Requested (Aerial, LOGPAC))
LINE 9 – LOCATION________________________________________ (UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator to Class IV Supply Point or LRP)
LINE 10 – NLT TIME _______________________________________ (Time Limit For Class IV to Arrive at Supply Point)
LINE 11 – NARRATIVE _____________________________________ (Free Text for Additional Information Required for Clarification of Report)
LINE 12 – AUTHENTICATION _______________________________ (Report Authentication)
TITLE: CLOSE AIR SUPPORT SUMMARY [CASSUM]
REPORT NUMBER: C025 {USMTF # C600}

GENERAL INSTRUCTIONS: Use to provide timely reports of close, air-support missions and other information obtained during post-flight aircrew debriefing. Reference: FM 6-71.

LINE 1 – DATE AND TIME _______________________________ (DTG)
LINE 2 – UNIT _______________________________ (Unit Making Report)
LINE 3 – NO. CAS MSN _______________________________ (Mission Number for First Mission of the Period and All Remaining Missions)
LINE 4 – NO. AND TYPE ACFT _______________________________ (Number and Type of Aircraft Used)
LINE 5 – SIGHTINGS _______________________________ (Information on Enemy Aircraft and Ground Targets Sighted During Ingress and Egress; Include Location, Direction, Type, Numbers)
LINE 6 – TARGET AREA LOCATION _______________________________ (UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator of Target)
LINE 7 – TARGET RESULTS _______________________________ (Type and Quantity of Targets Sighted, Destroyed, or Damaged in the Target Area)
LINE 8 – TARGET DEFENSE _______________________________ (Type, Quantity, and Location of Target Area Defense)
LINE 9 – TARGET WEATHER _______________________________ (Include Low Cloud Cover, Height of Low Cloud Base, Surface Visibility, and the General Weather Condition)
LINE 10 – TARGET AREA JAMMING _______________________________ (Include Type of Jamming Frequencies Jammed, Time Period of Jamming Electronic Protection Action Used, and Effectiveness of Electronic Protection Action Used)

**Continued on next page.
**Repeat lines 3 through 10 to report more than one CAS mission in a report period. Repeat lines 6 through 10 to report more than one target area within a CAS mission. Assign sequential line numbers to succeeding iterations; for example, first iteration 3 through 10 or 6 through 10; second iteration 3a through 10a or 6a through 10a; and so on.

LINE 11 – ORDNANCE _______________________________ (Type and Quantity Expended During Reporting Period)

LINE 12 – NARRATIVE _______________________________ (Free Text for Additional Information Required For Clarification of Report)

LINE 13 – AUTHENTICATION ________________________ (Report Authentication)
GENERAL INSTRUCTIONS: Use to inform commander of status of movement and capability of the unit to conduct future operations. Submit upon completion of movement as directed by commander. Reference: FM 71-2 and FM 71-3.

LINE 1 – DATE AND TIME ________________________________ (DTG)

LINE 2 – UNIT _________________________________________ (Unit Making Report)

LINE 3 – SP _____________________________________________ (UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator to the Start Point and SP Time if Required)

LINE 4 – RP _____________________________________________ (UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator to the Release Point and RP Time if Required)

LINE 5 – COMMAND POST ________________________________ (Command Post Location)

LINE 6 – CLOSING DTG _________________________________ (Closing DTG)

LINE 7 – ACCIDENTS ___________________________________ (Accidents/Incidents/Enemy Activity Encountered)

LINE 8 – ETA TO CONTINUE OPERATIONS ___________________ (Estimated Time Unit Will be Reconstituted and Ready to Continue Operations)

LINE 9 – SENSITIVE ITEMS STAT ________________________ (Weapons and Sensitive Items Inventory Complete YES/NO/ANY LOSS)

LINE 10 – NARRATIVE _________________________________ (Free Text for Additional Information Required for Clarification of Report)

LINE 11 – AUTHENTICATION _____________________________ (Report Authentication)
TITLE: COMMANDER'S SITUATION REPORT [SITREP]
REPORT NUMBER: C035 {USMTF # C400}

GENERAL INSTRUCTIONS: Use to keep the commander’s higher and lower staff updated and advised on the reporting commander’s critical situation. Reference: FM 100-15, FM 71-3, and FM 71-2.

LINE 1 – DATE AND TIME ________________________________ (DTG)
LINE 2 – UNIT _________________________________________ (Unit Making Report)
LINE 3 – REFERENCE ____________________________________ (Provide Reference: Report Title, Originator, and DTG)
LINE 4 – ORIGINATOR _________________________________ (Unit Identification Code of the Unit Originating the Report)
LINE 5 – REPORTED UNIT ______________________________ (Unit Identification Code of the Reported Unit)
LINE 6 – HOME LOCATION ______________________________ (UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator for the Home Location of the Reported Unit)
LINE 7 – PRESENT LOCATION ____________________________ (UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator for the Present Location of the Reported Unit)
LINE 8 – ACTIVITY ____________________________________ (Brief Description of Reported Unit's Current Activity)
LINE 9 – EFFECTIVE ________________________________ (Commander's Evaluation of the Reported Unit's Combat Effectiveness)

**Continued on next page.**
TITLE: COMMANDER'S SITUATION REPORT [SITREP] (CONTINUED)
REPORT NUMBER: C035 {USMTF # C400}

LINE 10 – OWN SITUATION DISPOSITION/STATUS ____________
(A Summary Updating Changes to or Not Previously Reported
Major Combatant and Support
Force Locations; Significant
Mission Readiness
Degradation on Units; Current
Deployments; Proposed
Deployments; Changes in Task
Force Designations;
Organization or Operational
Control (CHOP); and Projected
Requirements for Additional
Forces)

LINE 11 – LOCATION _______________________________________
(UTM or Six-Digit Grid
Coordinate With MGRS Grid
Zone Designator)

LINE 12 – SITUATION OVERVIEW ___________________________
(A Brief Overall Assessment of
the Situation to Include
Circumstances or Conditions
Which Increase or Materially
Detract From the Capability and
Readiness of Forces Assigned
or Under Operational Control of
the Command or Service)

LINE 13 – OPERATIONS ____________________________________
(A Brief Description and
Results of Offensive and
Defensive Operations Carried
Out by Major Combatant
Elements During the Period
of the Report; Information on
Allied Forces' Operations;
Summary of Plans for Combat
Operations During Next 24
Hours Including Objectives and
Probable Enemy Reaction;
Deviations or Variations From
Previously Reported
Intentions/Plans)

**Continued on next page.
TITLE: COMMANDER'S SITUATION REPORT [SITREP] (CONTINUED)
REPORT NUMBER: C035 {USMTF # C400}

LINE 14 – INTELLIGENCE/RECONNAISSANCE ________________ (Brief Overview of the Situation, Including Operations, Order of Battle, Capabilities, and Threat Changes; Reference: Any Significant Spot Intelligence Reports (SPIREPs) or Intelligence Reports (INTREPs) Submitted in Previous 24 Hours)

LINE 15 – LOGISTICS ______________________________________ (Significant Deficiencies Affecting Support for Planned Operations; Problem Areas Beyond the Commander's or Services' Capability to Overcome or Alleviate in a Timely Manner)

LINE 16 – COMMUNICATIONS/CONNECTIVITY _______________ (Significant Outages, Traffic Volume, Incompatibilities, and Quantitative Equipment Deficiencies; an Assessment of the Mission Impact Caused by Communications Outages and Degradations Should be Provided by the CINC's J-6/J-3 Staff and Contained in This Section)

LINE 17 – PERSONNEL _____________________________________ (Factors Affecting Readiness of Forces/Units; Mobilization Status; Daily Battle Casualties (Ex: KIA, WIA, MIA) Aggregated by Service and Impact of All Casualties Sustained (Battle, Nonbattle, Critical Skills, Key Personnel Upon the Commands' Mission Capability))

**Continued on next page.**
TITLE: COMMANDER’S SITUATION REPORT [SITREP] (CONTINUED)
REPORT NUMBER: C035 {USMTF # C400}

LINE 18 – SIGNIFICANT POLITICAL/MILITARY/ DIPLOMATIC EVENTS ________________________________________________ (Events Not Reported by OPREP 3 PINNACLE But Which Could Result in US and Local and International Public Reaction; Results/Decisions of Key Allied or Other Foreign Government Meetings; Civil Unrest Indications of Civil Defense Measures Contemplated or Implemented; Large-Scale Military Exercises; Events Emphasizing Interests of Key Segments of the Society)

LINE 19 – CDR’S EVAL _____________________________________ (Summary of Key Points From Paragraphs 12 Through 19 Highlighting Areas Requiring JCS and NCA Actions or Decisions; Continuity of Operations (COOP) Implementation Intentions on Execution)

LINE 20 – NARRATIVE _____________________________________ (Free Text for Information Required for Clarification of Report)

LINE 21 – AUTHENTICATION _______________________________ (Report Authentication)
COMPUTER ATTACK [COMPATK]
REPORT NUMBER: C040

GENERAL INSTRUCTIONS: Use to inform commander and staff of suspected attack into the command information system.

LINE 1 – DATE AND TIME ________________________________ (DTG)
LINE 2 – UNIT ________________________________________ (Unit Making Report)
LINE 3 – MISSION OF SYSTEM AFFECTED__________________ (Commander’s Assessment)
LINE 4 – EQUIPMENT STATUS _____________________________ (List Type of Equipment Affected)
LINE 5 – DTG ATTACK DETECTED _________________________ (DTG Computer System Was Attacked)
LINE 6 – DTG ATTACK ENDED _____________________________ (DTG Computer Attack Ended)
LINE 7 – SOFTWARE AFFECTED ___________________________ (List Type and Number of System Software Attacked)
LINE 8 – NUMBER OF SYSTEMS AFFECTED _________________ (List Number of Systems Affected by the Attack)
LINE 9 – TYPE OF ATTACK _______________________________ (List Type of Attack (Virus Type))
LINE 10 – ADDRESS OF SOURCE __________________________ (Address of Attacking Machine)
LINE 11 – INTRUSION METHOD ____________________________ (Method Used, for Example, Hacked in, From Disk, Internet)
LINE 12 – NARRATIVE __________________________________ (Free Text for Information Required for Clarification of Report)
LINE 13 – AUTHENTICATION ______________________________ (Report Authentication)
TITLE: CREW MANNING REPORT [CREWMNQREP]
REPORT NUMBER: C045

GENERAL INSTRUCTIONS: Use to inform commander and staff on status of crews in a unit (such as M1A2, M2A3, and AH-64 crew members). Send as directed by unit and IAW unit SOPs. Reference: FM 17-12-1/2 and FM 23-1.

LINE 1 – DATE AND TIME ________________________ (DTG)
LINE 2 – UNIT ________________________________ (Unit Making Report)
LINE 3 – CDR’S ASSESSMENT _________________________ (Commander’s Assessment (Bottom Line))
LINE 4 – EQUIPMENT STATUS ______________________ (Status)
   a. EQUIPMENT TYPE (M1A2) _________________
   b. MOS (19K) ____________________________
   c. PER REQ TO CREW; FULL/MIN (4/3) __________
   d. NO. CREWS REQUIRED BY TASK ____________
   e. NO. CREWS AVAILABLE; FULL/ MIN __________
   f. NO. CREWS REQUESTED ________________

LINE 5 – NARRATIVE _____________________________ (Free Text for Additional Information Required for Clarification of Report)

LINE 6 – AUTHENTICATION ________________________ (Report Authentication)
**TITLE: DAILY BLOOD REPORT [DBLDREP]**

REPORT NUMBER: D001

GENERAL INSTRUCTIONS: Use to convey unit blood supply to medical staff and unit commander. Reference: FM 8-10 and FM 8-10-9.

| LINE 1 – DATE AND TIME __________________________ (DTG) |
| LINE 2 – UNIT ________________________________________ (Unit Making Report) |
| LINE 3 – LOCATION _______________________________ (UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator) |
| LINE 4 – TOTAL NO. ON HAND/ BLOOD PRODUCT/ BLOOD GROUP | (Total Number of Blood Products on Hand by Blood Groups at the End of the Reporting Period) |
| LINE 5 – TOTAL NO. REQUIRED/ BLOOD PRODUCT | (Total Number of Blood Products Required by DTG) |
| LINE 6 – EST TOTAL NO. EXPIRE/ BLOOD PRODUCT/BLOOD GROUP | (Estimated Total Number of Blood Products by Blood Groups to Expire Within the Next Seven Days) |
| LINE 7 – EST TOTAL NO. REQUESTED/ BLOOD PRODUCT/ BLOOD GROUP | (Estimated Blood Supply by Quantity and Groups Requested Within the Next Seven Days) |

**Repeat lines 4 through 7 to report multiple mission/mission data. Assign sequential line numbers to succeeding iterations; for example, first iteration 4 through 17; second iteration 4a through 7a; third iteration 4b through 7b; and so on.**

| LINE 8 – CDR’S ASSESSMENT __________________________ (Commander’s Assessment) |
| LINE 9 – NARRATIVE ________________________________ (Free Text for Additional Information Required for Clarification of Report) |
| LINE 10 – AUTHENTICATION __________________________ (Report Authentication) |

LINE 1 – DATE AND TIME ______________________________ (DTG)

LINE 2 – UNIT ___________________________________ (Unit Making Report)

LINE 3 – EQUIPMENT TYPE/ AUTH/ON HAND/ NMC/BTL LOSS/ PART NO. STATUS

________________________________________________ (Equipment Type by Authorized, On Hand, Number Not Mission Capable, Battle Losses, and Part, Number, and Status)

EXAMPLE: M1A1/58/50/3/5/B 65 - 9124-001 P1/C21 - 9125-001 P1/D14 - 9125-017 P1

**Repeat line 3 to report multiple mission/mission data. Assign to succeeding iterations; for example, first iteration 3; second iteration 3a; third iteration 3b; and so on.

LINE 4 – UNIT OR RATE ______________________________ (Unit Operational Readiness (OR) Rate)

LINE 5 – NARRATIVE ________________________________ (Free Text for Information Required for Clarification of Report)

LINE 6 – AUTHENTICATION __________________________ (Report Authentication)
# Decontamination Request [DECONREQ]

**GENERAL INSTRUCTIONS:** Use to request decontamination by contaminated units. Initially request on CMD net, then send all traffic through administrative or logistics net. Send initial request with PRIORITY precedence. Reference: FM 3-5.

| LINE 1 – DATE AND TIME ____________________________ (DTG) |
| LINE 2 – UNIT _______________________________________ (Unit Making Report) |
| LINE 3 – TYPE DECON ________________________________ (Type of Decontamination Support Required (Operational/Thorough)) |
| LINE 4 – TYPE/QUANTITY ____________________________ (Type and Quantity of Equipment to be Decontaminated) |
| LINE 5 – DECON LOCATION ___________________________ (UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator of Decontamination Site Location) |
| LINE 6 – PERSONNEL ________________________________ (Number of Personnel Requiring Decontamination) |
| LINE 7 – TYPE CONTAMINATION ________________________ (Type of Contamination (Nuclear, Biological, or Chemical), if Chemical, Type Agent if Known) |
| LINE 8 – TIME TO DECON ___________________________ (Request Time to Start Decontaminate) |
| LINE 9 – LINK-UP POC ______________________________ (Frequency and Call Sign of Link-Up Point POC) |
| LINE 10 – CP AT DECON SITE _________________________ (Link-up Point Decontamination Assets) |

**Repeat lines 3 through 10 to report multiple mission/mission data. Assign sequential line numbers to succeeding iterations; for example, first iteration 3 through 10; second iteration 3a through 10a; third iteration 3b through 10b; and so on.**

| LINE 11 – NARRATIVE ________________________________ (Free Text for Additional Information Required for Clarification of Report) |
| LINE 12 – AUTHENTICATION __________________________ (Report Authentication) |
GENERAL INSTRUCTIONS: Use to update progress and status of decontamination sites in a unit’s area of operation. Submit as required IAW unit SOPs. Transmit on O&I ROUTINE precedence. Reference: FM 3-5.

LINE 1 – DATE AND TIME ________________________________ (DTG)

LINE 2 – UNIT ________________________________ (Unit Making Report)

LINE 3 – SUPPORT UNIT ________________________________ (Unit Conducting Decontamination)

LINE 4 – CONTAMINATED UNIT ________________________________ (Unit Being Decontaminated)

LINE 5 – PERCENT COMPLETE ________________________________ (Percentage of Decontamination Complete)

LINE 6 – TIME COMPLETE ________________________________ (DTG of Completion/Site Closure)

LINE 7 – CRITICAL SHORTAGES ________________________________ (Critical Shortages Needed to Complete Decontamination)

LINE 8 – CASUALTIES ________________________________ (Chemical Casualties)

LINE 9 – STATUS ________________________________ (Status of Decontamination Containment (Green, Yellow, Red, Blue))

LINE 10 – TYPE OF DECON ________________________________ (Operational/Thorough)

LINE 11 – NARRATIVE ________________________________ (Free Text for Additional Information Required for Clarification of Report)

LINE 12 – AUTHENTICATION ________________________________ (Report Authentication)
TITLE: DETAINED CIVILIAN PERSONNEL REPORT [DETAINCIVREP]
REPORT NUMBER: D020 {USMTF # C070}

GENERAL INSTRUCTIONS: Use to provide commander of incidents where the unit has detained civilian personnel. Send IAW unit SOPs. Reference: FM 19-40.

LINE 1 – DATE AND TIME ________________________________ (DTG)

LINE 2 – UNIT ________________________________ (Unit Making Report)

LINE 3 – NO. DETAINEES/ ________________________________ (Number of Personnel Detained and Awaiting Release to Foreign Nation Authorities)

LINE 4 – LOCATION ________________________________ (UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator of Collection Point)

LINE 5 – REASON FOR DETENTION ________________________________ (Reason for Detaining Civilian Personnel)

LINE 6 – MEDICAL CONDITION ________________________________ (Report if Detained Persons Require Any Emergency Medical Treatment)

LINE 7 – POC ________________________________ (POC of Foreign Nation Support)

LINE 8 – PM ASSESSMENT ________________________________ (PM Assessment)

LINE 9 – NARRATIVE ________________________________ (Free Text for Additional Information Required for Clarification of Report)

LINE 10 – AUTHENTICATION ________________________________ (Report Authentication)
TITLE: DIRECT SUPPORT UNIT REPORT [DERSPTREP]
REPORT NUMBER: D025

GENERAL INSTRUCTIONS: Use by logistics staff officers, combat health support officers, and commanders to report an assessment of the availability and capability of sustaining current and future unit operations. Can be executed as an estimate if required. Each class of supply requires a narrative that includes line number, quantity on-hand, and earliest time on station of resupply of critically short supplies or equipment. Send IAW commander’s situation report. Reference: FM 101-5 and FM 700-80.

LINE 1 – DATE AND TIME ________________________________ (DTG)
LINE 2 – UNIT ________________________________ (Unit Making Report)
LINE 3 – CDR’S ASSESSMENT ________________________________ (Commander’s Assessment)
LINE 4 – CLASS I ________________________________ (Class I Narrative)
LINE 5 – CLASS II ________________________________ (Class II Narrative)
LINE 6 – CLASS III ________________________________ (Class III Narrative)
LINE 7 – CLASS IV ________________________________ (Class IV Narrative)
LINE 8 – CLASS V ________________________________ (Class V Narrative)
LINE 9 – CLASS VI ________________________________ (Class VI Narrative)
LINE 10 – CLASS VII ________________________________ (Class VII Narrative)
LINE 11 – CLASS VIII ________________________________ (Class VIII Narrative)
LINE 12 – CLASS IX ________________________________ (Class IX Narrative (Include Maintenance Status))
LINE 13 – WATER ________________________________ (Class I Water)
LINE 14 – TRANSPORTATION ________________________________ (Transportation Assets Available)
LINE 15 – NARRATIVE ________________________________ (Free Text for Additional Information Required for Clarification of Report)
LINE 16 – AUTHENTICATION ________________________________ (Report Authentication)
TITLE: EA (ELECTRONIC ATTACK) DATA MESSAGE [EADAT]
REPORT NUMBER: E001 {USMTF # F751}

GENERAL INSTRUCTIONS: Use to triangulate an object jamming friendly units by comparing lines of bearing from different origins. Reference: FM 34-40-9 and FM 34-54.

LINE 1 – DATE AND TIME ________________________________ (DTG)
LINE 2 – UNIT _________________________________________ (Unit Making Report)
LINE 3 – TRACK ________________________________________ (Strobe Number)
LINE 4 – BEARING ________________________________________ (Bearing of the EA Strobe From Affected/Detecting Unit’s Position)
LINE 5 – POSITION _______________________________________ (UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator)
LINE 6 – FREQUENCY _____________________________________ (EA Frequency)
LINE 7 – AFFECTING ______________________________________ (Type of Equipment Affected by EA, if Known)
LINE 8 – EMITTER ________________________________________ (Emitter Call Sign and Name or Nomenclature)
LINE 9 – TIME ________________________________ (DTG of EA Intercept)
LINE 10 – NARRATIVE ____________________________________ (Free Text for Additional Information Required for Clarification of Report)
LINE 11 – AUTHENTICATION ________________________________ (Report Authentication)
GENERAL INSTRUCTIONS: Use to provide the command and staff the effective downwind data needed for prediction of fallout areas following NBC attacks. Reference: ATP-45 (A), FM 3-3, and FM 3-5.

LINE 1 – DATE AND TIME ____________________________ (DTG)

LINE 2 – UNIT __________________________________________ (Unit Making Report)

LINE 3 – REPORT __________________________________________ (Type of Report: EDM, EDF, EDM.NAV, or EDF.NAV)

LINE 4 – AREA ____________________________________________ (Area of Validity)

LINE 5 – ZULU MIKE ____________________________ (DTG Zulu of Observation and Beginning and End of Period Covered)

LINE 6 – ALFA MIKE ____________________________________ (2 KT or Less; Give Radius of Zone 1 in KM/Nautical Miles or Direction and Speed of Wind, With Warning Area Angle When Required)

LINE 7 – BRAVO MIKE ________________________________ (2 KT - 5 KT; Give Radius of Zone 1 in KM/Nautical Miles or Direction and Speed of Wind, With Warning Area Angle When Required)

LINE 8 – CHARLIE MIKE ________________________________ (5 KT - 30 KT; Give Radius of Zone 1 in KM/Nautical Miles or Direction and Speed of Wind, With Warning Area Angle When Required)

LINE 9 – DELTA MIKE ________________________________ (30 KT - 100 KT; Give Radius of Zone 1 in KM/Nautical Miles or Direction and Speed of Wind, With Warning Area Angle When Required)

**Continued on next page.
GENERAL INSTRUCTIONS: Use to promulgate a list of protected, guarded, and taboo frequencies to ensure friendly force use of the frequency spectrum without adverse impact from friendly electronic attack. Reference: FM 11-32.

LINE 1 – DATE AND TIME ________________________________ (DTG)

LINE 2 – UNIT _________________________________________ (Unit Making Report)

LINE 3 – TYPE _________________________________________ (TABOO, PROTECT, or GUARD)

LINE 4 – STATUS ________________________________________ (Restricted Status of Frequency: NEW, CHANGE, CANCEL, or RENEW)

LINE 5 – FREQUENCY _____________________________________ (Frequency (ies))

LINE 6 – ON TIME ________________________________________ (Start DTG of Frequency Restriction)

LINE 7 – OFF TIME ________________________________________ (End DTG of Frequency Restriction)

LINE 8 – LOCATION ______________________________________ (UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator)

**Repeat lines 3 through 8 as a group to accommodate multiple reportings. Assign sequential line numbers to succeeding iterations; for example, first iteration 3 through 8; second iteration 3a through 8a; and so on.

LINE 9 – NARRATIVE ____________________________________ (Free Text for Additional Information Required for Clarification of Report)

LINE 10 – AUTHENTICATION _______________________________ (Report Authentication)
TITLE: ELECTRONIC WARFARE MISSION SUMMARY [EWMSNSUM]
REPORT NUMBER: E010 {USMTF # G424}

GENERAL INSTRUCTIONS: Use to summarize significant EW missions and the status of offensive EW assets. Reference: FM 34-10.

LINE 1 – DATE AND TIME ________________________________ (DTG)
LINE 2 – UNIT _________________________________________ (Unit Making Report)
LINE 3 – FROM _________________________________________ (Beginning DTG Zulu of Period Summarized)
LINE 4 – THROUGH ______________________________________ (Ending DTG Zulu of Period Summarized)
LINE 5 – COUNTRY ______________________________________ (Nationality of the Target Emitter of Concern)
LINE 6 – LOCATION _____________________________________ (UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator)
LINE 7 – EMITTER ________________________________________ (Emitter Call Sign and Name or Nomenclature)
LINE 8 – FUNCTION _______________________________________ (Primary Function of Target)
LINE 9 – NOTATION _______________________________________ (Notation or Sorting Code)
LINE 10 – SIGNAL _______________________________________ (Type of Signal of Target Emitter)
LINE 11 – ON TIME ________________________________________ (DTG That Planned EA Activity Was Initiated)
LINE 12 – OFF TIME _______________________________________ (DTG That Planned EA Activity Was Terminated)
LINE 13 – PRIORITY ______________________________________ (Relative Importance of EA Mission)
LINE 14 – TYPE _________________________________________ (Type of EA Used Against the Emitter)
LINE 15 – PRIMARY FREQUENCY __________________________ (Primary Frequency of EA Target Signal)

**Continued on next page.
TITLE: ELECTRONIC WARFARE MISSION SUMMARY [EWMSNSUM] (CONTINUED)

REPORT NUMBER: E010 {USMTF # G424}

LINE 16 – SECONDARY FREQUENCY ________________________ (Secondary Frequency of EA Target Signal)

LINE 17 – LOW FREQUENCY ________________________________ (Lower Frequency Limit of Target Equipment Class)

LINE 18 – HIGH FREQUENCY _______________________________ (Upper Frequency Limit of Target Equipment Class)

LINE 19 – BANDWIDTH ____________________________________ (Target Frequency Bandwidth Expressed in MHz)

LINE 20 – PULSE REPETITION _______________________________ (Pulse Repetition Interval or Frequency)

LINE 21 – SYSTEM USED ___________________________________ (Name/Nomenclature of EW Asset Used to Perform the Task)

LINE 22 – OPERATIONAL _________________________________ (Number of Units That Can Perform Primary EW Mission)

LINE 23 – NONOPERATIONAL ______________________________ (Number of Units That Cannot Perform Primary EW Mission)

LINE 24 – DESTROYED ____________________________________ (Number of Units That Were Destroyed in Combat)

LINE 25 – CHAFF _________________________________________ (Type of Chaff)

LINE 26 – LOWER FREQUENCY ______________________________ (Lower Frequency of a Range of Frequencies That Was Blanked by Chaff or the Lower EA Frequency)

LINE 27 – UPPER FREQUENCY __________________________________ (Upper Frequency of a Range of Frequencies That Was Blanked by Chaff or the Lower EA Frequency)

LINE 28 – LOW LEVEL ___________________________________ (Lower Altitude in Hundreds of Feet of Airspace That Was Blanked by Chaff)

LINE 29 – UPPER LEVEL ___________________________________ (Upper Altitude in Hundreds of Feet of Airspace That Was Blanked by Chaff)

**Continued on next page.
TITLE: ELECTRONIC WARFARE MISSION SUMMARY [EWMSNSUM] (CONTINUED)
REPORT NUMBER: E010 {USMTF # G424}

LINE 30 – TECHNIQUE ________________________________ (EA Technique Employed)
LINE 31 – COUNTRY ________________________________ (Country in Which Chaff Was Employed)
LINE 32 – ON TIME ________________________________ (DTG That the Chaff Drop Was Initiated)
LINE 33 – OFF TIME ________________________________ (DTG That the Chaff Drop Was Terminated)
LINE 34 – START LOCATION ___________________________ (Start Location of the Chaff Drop in UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator)
LINE 35 – STOP LOCATION ___________________________ (Stop Location of the Chaff Drop in UTM or Six-Digit Grid Coordinate With Grid Zone Designator)
LINE 36 – NARRATIVE _______________________________ (Free Text for Additional Information Required for Clarification of Report)
LINE 37 – AUTHENTICATION ___________________________ (Report Authentication)
GENERAL INSTRUCTIONS: Use (1) to task component commanders to perform EW operations to support the overall EW plan, (2) to support component EW operations, and (3) to request EW support from sources outside their commands. Reference: FM 34-10-2.

LINE 1 – DATE AND TIME ________________________________ (DTG)

LINE 2 – UNIT ________________________________ (Unit Making Report)

LINE 3 – EA ________________________________ (Electronic Activity)

LINE 4 – TASKED ________________________________ (Designator of Tasked Unit if the JOC is Tasking the Unit)

LINE 5 – COUNTRY ________________________________ (Nationality of the Target Emitter of Concern)

LINE 6 – LOCATION ________________________________ (UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator)

LINE 7 – EMITTER ________________________________ (Emitter Call Sign and Name or Nomenclature)

LINE 8 – FUNCTION ________________________________ (Primary Function of Target)

LINE 9 – NOTATION ________________________________ (Notation or Sorting Code)

LINE 10 – SIGNAL ________________________________ (Type of Signal of Target Emitter)

LINE 11 – ON TIME ________________________________ (DTG That Planned EA Activity Was Initiated)

LINE 12 – OFF TIME ________________________________ (DTG That Planned EA Activity Will be Terminated)

LINE 13 – PRIORITY ________________________________ (Relative Importance of EA Mission)

LINE 14 – TYPE ________________________________ (Type of EA and Technique Used Against the Emitter)

LINE 15 – PRIMARY FREQUENCY ________________________________ (Primary Frequency of EA Target Signal)

**Continued on next page.
TITLE: ELECTRONIC WARFARE REQUESTING/TASKING REPORT [EWRTM]
(CONTINUED)
REPORT NUMBER: E015 {USMTF # A426}

LINE 16 – SECONDARY FREQUENCY ________________________ (Secondary Frequency of EA Target Signal)
LINE 17 – LOW FREQUENCY ________________________________ (Lower Frequency Limit of Target Class)
LINE 18 – HIGH FREQUENCY _______________________________ (Upper Frequency Limit of Target Class)
LINE 19 – BANDWIDTH ____________________________________ (Target Frequency Bandwidth Expressed in MHz)
LINE 20 – PULSE REPETITION________________________________ (Pulse Repetition Interval or Frequency)
LINE 21 – ES ______________________________________________ (Electronic Support)
LINE 22 – COUNTRY _______________________________________ (Nationality of the Target Emitter of Concern)
LINE 23 – LOCATION_______________________________________ (Emitter Location Described in UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator)
LINE 24 – EMITTER ________________________________________ (Emitter Call Sign and Name or Nomenclature)
LINE 25 – FUNCTION_______________________________________ (Primary Function of Target)
LINE 26 – NOTATION ______________________________________ (Notation or Sorting Code)
LINE 27 – SIGNAL _________________________________________ (Type of Signal of Target Emitter)
LINE 28 – PRIMARY FREQUENCY _____________________________ (Primary Frequency of ES Target Signal)
LINE 29 – SECONDARY FREQUENCY __________________________ (Secondary Frequency of ES Target Signal)
LINE 30 – LOW FREQUENCY ________________________________ (Lower Frequency Limit of Target Equipment Class)

**Continued on next page.**
**TITLE: ELECTRONIC WARFARE REQUESTING/TASKING REPORT [EWRTM]
(CONTINUED)**

**REPORT NUMBER:** E015 {USMTF # A426}

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<tr>
<td>LINE 41 – LOW LEVEL</td>
<td>(Lower Altitude in Hundreds of Feet of Airspace to be Blanked by Chaff)</td>
</tr>
<tr>
<td>LINE 42 – UPPER LEVEL</td>
<td>(Upper Altitude in Hundreds of Feet of Airspace to be Blanked by Chaff)</td>
</tr>
<tr>
<td>LINE 43 – TECHNIQUE</td>
<td>(EA Technique to be Employed)</td>
</tr>
</tbody>
</table>

**Continued on next page.**
TITLE: ELECTRONIC WARFARE REQUESTING/TASKING REPORT [EWRTM]
(CONTINUED)
REPORT NUMBER: E015 {USMTF # A426}

LINE 44 – COUNTRY ________________________________________ (Country in Which Chaff is to be Employed)

LINE 45 – ON TIME ________________________________________ (DTG That the Planned Chaff Drop Will be Initiated)

LINE 46 – OFF TIME ________________________________________ (DTG That the Planned Chaff Drop Will Terminate)

LINE 47 – START LOCATION ________________________________ (Start Location of the Chaff Drop in UTM or Six-Digit Grid Coordinate With Grid Zone Designator)

LINE 48 – STOP LOCATION _________________________________ (Stop Location of the Chaff Drop in UTM or Six-Digit Grid Coordinate With Grid Zone Designator)

LINE 49 – NARRATIVE _____________________________________ (Free Text for Additional Information Required for Clarification of Report)

LINE 50 – AUTHENTICATION _______________________________ (Report Authentication)
TITLE: ENEMY/FRIENDLY/UNIT MINEFIELD/OBSTACLE REPORT [MINOBREP]
REPORT NUMBER: E025

GENERAL INSTRUCTIONS: Use to report all obstacles on the battlefield after developing a report. Disseminate information and report to all command posts and units in the area of operation as soon as possible. Reference: FM 90-13-1, FM 20-32, and FM 5-34.

LINE 1 – DATE AND TIME ________________________________ (DTG)
LINE 2 – UNIT _________________________________________ (Unit Making Report)
LINE 3 – EMLACING UNIT ________________________________ (Emplacing Unit, if Known (Enemy, Friendly Unit, Unit))
LINE 4 – APPROVING AUTHORITY _________________________ (Approving Authority, if Required or Known)
LINE 5 – TARGET/OBSTACLE NO. _________________________ (Target/Obstacle Number, if Required or Known)
LINE 6 – TYPE OF EMLACING SYSTEM ___________________ (Type of Emplacing System, if Required or Known)
LINE 7 – TYPE MINES/OBSTACLES ______________________ (Type Mines/Obstacle, if Known Include Width and Depth)
LINE 8 – TYPE MARKING SYSTEM _________________________ (Type Minefield/Obstacle Marking System, if Emplaced)
LINE 9 – LIFE CYCLE DTG __________________________________ (DTG of Life Cycle/Self-Destruct Time, if Known)
LINE 10 – CORNER LOCATIONS ____________________________ (UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator of Corners)
LINE 11 – REDUCE _____________________________________ (Obstacle/Minefield Reduced, YES or NO)
LINE 12 – NO. OF LANES _________________________________ (Number of Lanes)
LINE 13 – REDUCTION ASSET USED _________________________ (MICLIC, Mine Plow, Mine Roller, Demolitions, and so on)
LINE 14 – WIDTH ________________________________________ (Width of Lane)
LINE 15 – DEPTH _________________________________________ (Depth of Lane)

**Continued on next page.**
**TITLE: ENEMY/FRIENDLY/UNIT MINEFIELD/OBSTACLE REPORT [MINOBREP]**

(CONTINUED)

**REPORT NUMBER: E025**

<table>
<thead>
<tr>
<th>LINE</th>
<th>DESCRIPTION</th>
<th>LOCATION/COORDINATES</th>
<th>OBSTACLE INFORMATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>16</td>
<td>GRID TO START OF LANE</td>
<td>(UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator of Start of Lane (Entrance))</td>
<td></td>
</tr>
<tr>
<td>17</td>
<td>GRID TO END OF LANE</td>
<td>(UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator of End of Lane (Exit))</td>
<td></td>
</tr>
<tr>
<td>18</td>
<td>LANE MARKING</td>
<td>(Type of Marking System, if Emplaced)</td>
<td></td>
</tr>
<tr>
<td>19</td>
<td>BYPASS</td>
<td>(YES or NO)</td>
<td></td>
</tr>
<tr>
<td>20</td>
<td>BYPASS GRID</td>
<td>(UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator to Bypass)</td>
<td></td>
</tr>
<tr>
<td>21</td>
<td>BARRIERS</td>
<td>(Concertina Wire, Pickets, and/or Trenches, and any other obstacle information necessary)</td>
<td></td>
</tr>
<tr>
<td>22</td>
<td>NARRATIVE</td>
<td>(Free Text for Additional Information Required for Clarification of Report)</td>
<td></td>
</tr>
<tr>
<td>23</td>
<td>AUTHENTICATION</td>
<td>(Report Authentication)</td>
<td></td>
</tr>
</tbody>
</table>
**GENERAL INSTRUCTIONS:** Use to convey status and disposition of unit’s EPWs. Send IAW unit SOPs. Reference: FM 19-40.

**LINE 1 – DATE AND TIME ____________________________ (DTG)**

**LINE 2 – UNIT ________________________________ (Unit Making Report)**

**LINE 3 – COUNTRY/ NO. EPW OFF/ __________________________ (By Country of EPW, Number of EPW NCO/ENL/Officers, Number of Lower Enlisted, Total EPW)**

  a. Country____________________
  b. Enemy Officer: GC____/ Field Grade ____/ CO Grade ____/ WO ___/
  c. Enemy Enlisted: CSM____/ E-6 – E-8 ____/ E-5 – CPL____/ ENL____/
  d. TOTAL NO.___________

**LINE 4 – EPW SITE LOCATIONS ____________________________ (EPW UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator)**

**LINE 5 – NO. EPW MISSING _______________________________ (Number EPW Missing or Escaped)**

**LINE 6 – NO. EPW ESCAPE ATTEMPTS __________________________ (Number EPW Escape Attempts)**

**LINE 7 – MEDICAL TREATMENT /EVAC ______________________ (Number of EPW Requiring Medical Care and/or Are Transferred to the Combat Health Staff Chain for Medical Evacuation)**

**LINE 8 – INCIDENT SUMMARY ______________________________ (Summary of Incidents)**

**LINE 9 – IRC INSPECTION RESULTS _________________________ (International Red Cross Inspections Results, if Required)**

**Repeat lines 3 through 9 to report multiple mission/mission data. Assign sequential line numbers to succeeding iterations; for example, first iteration 3 through 9; second iteration 3a through 9a; third iteration 3b through 9b; and so on.**

**LINE 10 – PM ASSESSMENT ________________________________ (PM Assessment)**

**Continued on next page.**
TITLE: ENEMY/PRISONER OF WAR REPORT [EPOW] (CONTINUED)
REPORT NUMBER: E030

LINE 11 – NARRATIVE ____________________________ (Free Text for Additional Information Required for Clarification of Report)

LINE 12 – AUTHENTICATION ________________________ (Report Authentication)
TITLE: ENVIRONMENTAL CONDITION REPORT [ECR]
REPORT NUMBER: E035

GENERAL INSTRUCTIONS: Use to send periodic information (interim snapshots) of the environmental status of specific sites (assembly areas, base camps, logistical support areas, and medical facilities) where hazards are likely to occur, which can result in significant, immediate and/or long-term effects on the natural environment and/or health of friendly forces and noncombatants. Send IAW unit SOPs and commander’s direction.

LINE 1 – DATE AND TIME _______________________________ (DTG)
LINE 2 – UNIT _______________________________ (Unit Making Report)
LINE 3 – LOCATION _______________________________ (UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator of Site/Incident)
LINE 4 – DESCRIPTION _______________________________ (Description of Site/Incident)
LINE 5 – CHANGES _______________________________ (Changes From Last ECR or Environmental Baseline Survey EBS)
LINE 6 – HAZARDS _______________________________ (Hazards to Natural Environment, Friendly Forces and/or Civilian Personnel)
LINE 7 – ACTIONS _______________________________ (Summary of Actions to Minimize Hazards/Remedial Effects)
LINE 8 – UNIT POC _______________________________ (Reporting Unit Point of Contact)
LINE 9 – ASSISTANCE _______________________________ (Assistance Required/Requested)
LINE 10 – REFERENCE _______________________________ (Site-Specific EBS (if required))
LINE 11 – NARRATIVE _______________________________ (Free Text for Additional Information Required for Clarification of Report)
LINE 12 – AUTHENTICATION _______________________________ (Report Authentication)
TITLE: EXPLOSIVE ORDNANCE DISPOSAL SUPPORT [EODSPT]
REPORT NUMBER: E040 {USMTF # D983}

GENERAL INSTRUCTIONS: Use (1) to request explosive ordinance disposal (EOD) support, (2) to report the results of an EOD mission, or (3) to request EOD support to protect designated very important persons. Reference: FM 9-15.

LINE 1 – DATE AND TIME ____________________________ (DTG)
LINE 2 – UNIT ________________________________ (Unit Making Report)
LINE 3 – ACTIVITY ________________________________ (Type of EOD Activity the Report Concerns: Either EOD REQUEST, EOD RESPONSE, or VIP REQUEST)
LINE 4 – REQUESTOR ________________________________ (Identifier of Unit/Agency Requesting EOD Support)
LINE 5 – EOD UNIT ________________________________ (Identifier of Unit/Agency Performing the EOD Mission)
LINE 6 – CATEGORY ________________________________ (EOD Incident Category Assigned by Requestor; Either INDIRECT, IMMEDIATE, MINOR, or NONE)
LINE 7 – DISCOVERED ________________________________ (DTG Zone When the Unexploded Ordnance Was Discovered)
LINE 8 – DESCRIPTION ________________________________ (If Applicable, Any Additional Descriptive Information Related to the Threat Posed to Resources and Facilities by Unexploded Ordnance)
LINE 9 – ORDNANCE ________________________________ (Number, Type, and Location of Unexploded Ordnance to be Neutralized; Repeat, as Required)
LINE 10 – CONDITION ________________________________ (Either ARMED or UNARMED)

**Continued on next page.
TITLE: EXPLOSIVE ORDNANCE DISPOSAL SUPPORT [EODSPT] (CONTINUED)
REPORT NUMBER: E040 {USMTF # D983}

LINE 11 – SITUATION ________________________________________ (Either DROPPED, IN FIRE, UNDERWATER, ACCIDENT, or a Literal Description of the Circumstances Surrounding the Incident)

**Lines 6 through 11 are applicable if the report is a request for explosive ordnance neutralization.

LINE 12 – REPORTED ________________________________________ (DTG Zone When EOD Incident Was Reported)

LINE 13 – EOD TEAM TIME OF ARRIVAL _____________________ (DTG Zone When EOD Team Arrived)

LINE 14 – COMPLETED _____________________________________ (DTG Zone When EOD Action Completed)

LINE 15 – EOD ACTION TAKEN _____________________________ (Disposition, Condition, Situation, or Other Information Concerning EOD Action Taken)

**Lines 12 through 15 are applicable if the report contains the results of an EOD mission.

LINE 16 – PROTECT ________________________________________ (Title and Last Name of Individual to be Protected)

LINE 17 – NO. OF PERSONNEL ______________________________ (Number of EOD Personnel Required for Mission)

LINE 18 – DEPART _________________________________________ (Departure Point Name or Coordinates)

LINE 19 – TRANSPORTATION _______________________________ (Transportation Mode(s) of VIP During Support Period)

LINE 20 – COUNTRIES/AREAS ______________________________ (Countries/Areas in Which Support is Required)

**Repeat lines 17 through 20 to indicate the number of personnel required, departure point, VIP transportation mode, and country/area requiring support. Assign repetitions in succeeding iterations sequential line numbers; for example, first iteration 17 through 20; second iteration 17a through 20a; third iteration 17b through 20b, and so on.

LINE 21 – BEGIN ___________________________________________ (DTG to Begin Zone VIP Support)

**Continued on next page.
TITLE: EXPLOSIVE ORDNANCE DISPOSAL SUPPORT [EODSPT] (CONTINUED)
REPORT NUMBER: E040 {USMTF # D983}

LINE 22 – END _____________________________________________ (DTG to End Zone VIP Support)

**Repeat lines 21 and 22 to indicate the time VIP support is to begin and end. Assign sequential line numbers to succeeding iterations; for example, first iteration 21 through 22; second iteration 21a through 22a; third iteration 21b through 22b, and so on.

LINE 23 – POC _____________________________________________ (Title and Last Name of Individual Designated as the Requesting Unit’s POC for Coordinating EOD VIP Support)

LINE 24 – TELEPHONE _____________________________________ (Telephone Number of POC)

LINE 25 – FREQUENCY _____________________________________ (Primary Radio Frequency of Unit/Agency Requiring EOD Support)

LINE 26 – LOCATION_______________________________________ (UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator of POC)

**Lines 16 through 26 are applicable if report is a VIP EOD support request.

**Lines 23 through 26 are applicable if a POC has been designated by the unit requesting VIP EOD protection support.

LINE 27 – SPECIAL REQUIREMENTS _________________________ (Statement of Any Special Requirements for EOD Support Mission)

LINE 28 – NARRATIVE _____________________________________ (Free Text for Additional Information Required for Clarification of Report)

LINE 29 – AUTHENTICATION _______________________________ (Report Authentication)
GENERAL INSTRUCTIONS: Use to report the location and identification code of one or more radar beacons. Reference: FM 6-121.

LINE 1 – DATE AND TIME ________________________________ (DTG)
LINE 2 – UNIT ________________________________________ (Unit Making Report)
LINE 3 – BEACON NAME ________________________________ (Beacon Name)
LINE 4 – CODE ________________________________________ (Beacon Code)
LINE 5 – LOCATION ____________________________________ (Beacon Location, UTM or Six-Digit Grid Coordinate With Grid Zone Designator)
LINE 6 – ON __________________________________________ (Relative on Time or Beacon on DTG)
LINE 7 – OFF __________________________________________ (Relative off Time or Beacon off DTG)
LINE 8 – NARRATIVE ___________________________________ (Free Text for Additional Information Required for Clarification of Report)

**Repeat lines 3 through 8 to report information on multiple beacons. Assign sequential line numbers to succeeding iterations; for example, first iteration 3 through 8; second iteration 3a through 8a, and so on.

LINE 9 – AUTHENTICATION ________________________________ (Report Authentication)
TITLE: FIRE MISSION-REQUEST TO FIRE [FM.RF]
REPORT NUMBER: F005 {USMTF # D212}

GENERAL INSTRUCTIONS: Use to request permission to fire across common boundaries from an adjacent service unit. Reference: FM 6-30.

LINE 1 – DATE AND TIME ________________________________ (DTG)
LINE 2 – UNIT ________________________________ (Unit Making Report)
LINE 3 – TARGET NO. ________________________________ (Fire Support Target Number)
LINE 4 – GRID ________________________________ (UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator)
LINE 5 – DESCRIPTION ________________________________ (Target Description)
LINE 6 – FIRING UNIT ________________________________ (Firing Unit)
LINE 7 – WEAPON ________________________________ (Weapon Type)
LINE 8 – ROUNDS IN EFFECT ________________________________ (Number of Rounds in Effect)
LINE 9 – PROJECTILE ________________________________ (Projectile Type)
LINE 10 – FUZE ________________________________ (Fuze Type)
LINE 11 – EST DTG INITIAL RDS ________________________________ (Estimated DTG of Initial Rounds)
LINE 12 – NARRATIVE ________________________________ (Free Text for Additional Information Required for Clarification of Report)
LINE 13 – AUTHENTICATION ________________________________ (Report Authentication)
GENERAL INSTRUCTIONS: Use to specify the h-hour, the number of fire plan phases, the phases start times relative to h-hour, and the phase lengths. Reference: FM 6-20 and FM 6-20-10.

LINE 1 – DATE AND TIME _______________________________ (DTG)
LINE 2 – UNIT _________________________________________ (Unit Making Report)
LINE 3 – POI ___________________________________________ (Primary Option Indicator. Enter ADD, AMEND, or CANCEL)
LINE 4 – PLAN _________________________________________ (Fire Plan Designation)
LINE 5 – H-HOUR _______________________________________ (H-Hour Fire Plan Operation Order)
LINE 6 – ALFA START _________________________________ (Phase Start Time)
LINE 7 – LENGTH ______________________________________ (Fire Plan Phase Length in Minutes)
LINE 8 – BRAVO START _________________________________ (Phase Start Time)
LINE 9 – LENGTH ______________________________________ (Fire Plan Phase Length in Minutes)
LINE 10 – CHARLIE START _______________________________ (Phase Start Time)
LINE 11 – LENGTH ______________________________________ (Fire Plan Phase Length in Minutes)
LINE 12 – DELTA START _________________________________ (Phase Start Time)
LINE 13 – LENGTH ______________________________________ (Fire Plan Phase Length in Minutes)
LINE 14 – NARRATIVE __________________________________ (Free Text for Additional Information Required for Clarification of Report)
LINE 15 – AUTHENTICATION _____________________________ (Report Authentication)
GENERAL INSTRUCTIONS: Use (1) to identify the firing element and (2) to specify the number of rounds or effects required for each target in a fire plan. Reference: FM 6-20 and FM 6-20-10.

LINE 1 – DATE AND TIME ________________________________ (DTG)

LINE 2 – UNIT __________________________________________ (Unit Making Report)

LINE 3 – POI ____________________________________________ (Primary Option Indicator. Enter ADD, AMEND, or CANCEL)

LINE 4 – PLAN __________________________________________ (Fire Plan Designation)

LINE 5 – UNIT DESIGNATORS ______________________________ (Section, Platoon, Battery/Company, Battalion/Regiment and Regiment/Brigade/Division Designators, or Ship Call Sign(s))

LINE 6 – UNIT DESIGNATORS ______________________________ (Section, Platoon, Battery/Company, Battalion/Regiment and Regiment/Brigade/Division Designators, or Ship Call Sign(s))

LINE 7 – UNIT DESIGNATORS ______________________________ (Section, Platoon, Battery/Company, Battalion/Regiment and Regiment/Brigade/Division Designators, or Ship Call Sign(s))

LINE 8 – UNIT DESIGNATORS ______________________________ (Section, Platoon, Battery/Company, Battalion/Regiment and Regiment/Brigade/Division Designators, or Ship Call Sign(s))

LINE 9 – UNIT DESIGNATORS ______________________________ (Section, Platoon, Battery/Company, Battalion/Regiment and Regiment/Brigade/Division Designators, or Ship Call Sign(s))

LINE 10 – TARGET NO. ________________________________ (Fire Support Target Number)

**Continued on next page.**
| Line 11 – Target Identification Number | Line 12 – Type of Trajectory |
| Line 13 – Type of Trajectory |
| Line 14 – Type of Trajectory |
| Line 15 – Type of Trajectory |
| Line 16 – Type of Trajectory |
| Line 17 – Number of Initial Volleys and Number of Subsequent Volleys |
| Line 18 – Number of Initial Volleys and Number of Subsequent Volleys |
| Line 19 – Number of Initial Volleys and Number of Subsequent Volleys |
| Line 20 – Number of Initial Volleys and Number of Subsequent Volleys |
| Line 21 – Number of Initial Volleys and Number of Subsequent Volleys |
| Line 22 – Effects (Percent Damage Required) |
| Line 23 – Effects (Percent Damage Required) |
| Line 24 – Effects (Percent Damage Required) |
| Line 25 – Effects (Percent Damage Required) |
| Line 26 – Effects (Percent Damage Required) |
| Line 27 – Time in Minutes Relative to H-Hour |

**Continued on next page.**
LINE 28 – PHASE ________________________________ (Phase of Fire)

LINE 29 – SHELL ________________________________ (Initial Volley Projectile and Subsequent Volley Projectile)

LINE 30 – SHELL ________________________________ (Initial Volley Projectile and Subsequent Volley Projectile)

LINE 31 – SHELL ________________________________ (Initial Volley Projectile and Subsequent Volley Projectile)

LINE 32 – SHELL ________________________________ (Initial Volley Projectile and Subsequent Volley Projectile)

LINE 33 – SHELL ________________________________ (Initial Volley Projectile and Subsequent Volley Projectile)

LINE 34 – FUZE ________________________________ (Initial Volley Fuze and Subsequent Volley Fuze)

LINE 35 – FUZE ________________________________ (Initial Volley Fuze and Subsequent Volley Fuze)

LINE 36 – FUZE ________________________________ (Initial Volley Fuze and Subsequent Volley Fuze)

LINE 37 – FUZE ________________________________ (Initial Volley Fuze and Subsequent Volley Fuze)

LINE 38 – FUZE ________________________________ (Initial Volley Fuze and Subsequent Volley Fuze)

LINE 39 – TARGET LIST ____________________________ (Target List/Last Target Indicator)

**Repeat lines 10 through 39 if necessary. Assign sequential line numbers to succeeding iterations; for example, first iteration 10 through 39; second iteration 10a through 39a; and so on.

LINE 40 – NARRATIVE ______________________________ (Free Text for Additional Information Required for Clarification of Report)

LINE 41 – AUTHENTICATION ___________________________ (Report Authentication)
### FM 101-5-2

**TITLE:** FIRE PLANNING-FIRE PLAN TARGET LIST [FP.FPT]

**REPORT NUMBER:** F020 (USMTF # E271)

**GENERAL INSTRUCTIONS:** Use (1) to list targets in the Fire Plan Target List and (2) to give scheduling data of fires in a fire plan. Reference: FM 6-20 and FM 6-20-10.

<table>
<thead>
<tr>
<th>LINE 1</th>
<th>DATE AND TIME ________________________________ (DTG)</th>
</tr>
</thead>
<tbody>
<tr>
<td>LINE 2</td>
<td>UNIT _____________________________________________ (Unit Making Report)</td>
</tr>
<tr>
<td>LINE 3</td>
<td>POI ______________________________________________ (Primary Option Indicator. Enter ADD, AMEND, or CANCEL)</td>
</tr>
<tr>
<td>LINE 4</td>
<td>PLAN _____________________________________________ (Fire Plan Designation)</td>
</tr>
<tr>
<td>LINE 5</td>
<td>TARGET NO. ________________________________ (Fire Support Target Number)</td>
</tr>
<tr>
<td>LINE 6</td>
<td>TARGET ID ______________________________________ (Target Identification Number)</td>
</tr>
<tr>
<td>LINE 7</td>
<td>ZONE ____________________________________________ (UTM Grid Zone and 100-KM Square)</td>
</tr>
<tr>
<td>LINE 8</td>
<td>GRID ___________________________________________ (UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator)</td>
</tr>
<tr>
<td>LINE 9</td>
<td>TARGET ELEMENTS _______________________________ (Number of Target Elements)</td>
</tr>
<tr>
<td>LINE 10</td>
<td>TYPE ____________________________________________ (Target or Friendly Unit Type and Subtype)</td>
</tr>
<tr>
<td>LINE 11</td>
<td>PROTECTION ______________________________________ (Degree of Personnel Protection)</td>
</tr>
<tr>
<td>LINE 12</td>
<td>RADIUS _________________________________________ (Target Radius in Meters)</td>
</tr>
<tr>
<td>LINE 13</td>
<td>LENGTH _________________________________________ (Target Length in Meters)</td>
</tr>
<tr>
<td>LINE 14</td>
<td>WIDTH __________________________________________ (Target Width in Meters)</td>
</tr>
<tr>
<td>LINE 15</td>
<td>ATTITUDE _______________________________________ (Target Attitude in Mils)</td>
</tr>
<tr>
<td>LINE 16</td>
<td>ACCURACY _______________________________________ (Target Report Accuracy in Meters)</td>
</tr>
<tr>
<td>LINE 17</td>
<td>RELATIVE TIME _________________________________ (Time in Minutes Relative to H-Hour)</td>
</tr>
</tbody>
</table>

**Continued on next page.**
TITLE: FIRE PLANNING-FIRE PLAN TARGET LIST [FP.FPT] (CONTINUED)
REPORT NUMBER: F020 {USMTF # E271}

LINE 18 – PRIORITY _______________________________ (Fire Plan Target Priority)
LINE 19 – PHASE _______________________________ (Phase of Fire)
LINE 20 – PHASE _______________________________ (Phase of Fire)
LINE 21 – PHASE _______________________________ (Phase of Fire)
LINE 22 – PHASE _______________________________ (Phase of Fire)
LINE 23 – GROUP _______________________________ (Target Group Number)
LINE 24 – SERIES _______________________________ (Target Series Name and Attack Sequence Number)
LINE 25 – POSITION _______________________________ (Single Firing Site Designator)
LINE 26 – TARGET LIST _______________________________ (Target List/Last Target Indicator)

**Repeat lines 5 through 26 if necessary. Assign sequential line numbers to succeeding iterations; for example, first iteration 5 through 26; second iteration 5a through 26a; and so on.

LINE 27 – NARRATIVE _______________________________ (Free Text for Additional Information Required for Clarification of Report)
LINE 28 – AUTHENTICATION _______________________________ (Report Authentication)
**GENERAL INSTRUCTIONS:** Use to add, amend, or cancel the specified nuclear target in a specified fire plan. Reference: FM 6-20.

- **LINE 1 – DATE AND TIME** ______________________________ (DTG)
- **LINE 2 – UNIT** ________________________________ (Unit Making Report)
- **LINE 3 – POI** ________________________________ (Primary Option Indicator. Enter ADD, AMEND, or CANCEL)
- **LINE 4 – PLAN** ________________________________ (Fire Plan Designation)
- **LINE 5 – TARGET NO.** ________________________________ (Fire Support Target Number)
- **LINE 6 – ZONE** ________________________________ (UTM Grid Zone and 100-KM Square)
- **LINE 7 – GRID** ________________________________ (UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator)
- **LINE 8 – ALTITUDE** ________________________________ (Altitude in Meters)
- **LINE 9 – DGZ GZ & 100-KM SQ** ________________________________ ( Desired Ground Zero - UTM Grid Zone and 100-KM Square)
- **LINE 10 – DGZ 1M E & 1M N** ________________________________ (Desired Ground Zero - UTM 1-Meter Easting and UTM 1-Meter Northing)
- **LINE 11 – GZ ALTITUDE** ________________________________ (Ground Zero Altitude in Meters)
- **LINE 12 – TARGET ELEMENTS** ________________________________ (Number of Target Elements)
- **LINE 13 – TYPE** ________________________________ (Target or Friendly Unit Type and Subtype)
- **LINE 14 – PROTECTION** ________________________________ (Degree of Personnel Protection)
- **LINE 15 – RADIUS** ________________________________ (Target or Friendly Unit Radius)

**Continued on next page.**
TITLE: FIRE PLANNING-NUCLEAR SCHEDULE [FP.NUCSCD] (CONTINUED)
REPORT NUMBER: F025 {USMTF # D271}

LINE 16 – LENGTH _________________________________________ (Target or Friendly Unit Length)

LINE 17 – WIDTH __________________________________________ (Target or Friendly Unit Width)

LINE 18 – ATTITUDE _______________________________________ (Attitude in Mils)

LINE 19 – TIME ____________________________________________ (Time in Minutes Relative to H-Hour)

LINE 20 – DURATION ______________________________________ (Duration of Fire)

LINE 21 – UNIT DESIGNATORS ______________________________ (Section, Platoon, Battery/Company, Battalion/Regiment and Regiment/Brigade/Division Designators)

LINE 22 – POSITION ________________________________________ (UTM or Six-Digit Grid Coordinate With Grid Zone Single Firing Site Designator)

LINE 23 – FIRE FOR EFFECT __________________________________ (Fire for Effect Number of Volleys)

LINE 24 – PROJECTILE _____________________________________ (Fire for Effect Projectile)

LINE 25 – FUZE ____________________________________________ (Fire for Effect Fuze)

LINE 26 – NARRATIVE _____________________________________ (Free Text for Additional Information Required for Clarification of Report)

LINE 27 – AUTHENTICATION _______________________________ (Report Authentication)
FM 101-5-2

TITLE: FIRE PLANNING-RESERVE FIRE UNIT [FP.RESFU]
REPORT NUMBER: F030 {USMTF # A271}

GENERAL INSTRUCTIONS: Use to preclude use of fire units during a specific time interval in a specific fire plan. Reference: FM 6-20.

LINE 1 – DATE AND TIME ________________________________ (DTG)
LINE 2 – UNIT _________________________________________ (Unit Making Report)
LINE 3 – POI ___________________________________________ (Primary Option Indicator. Enter ADD, AMEND, or CANCEL)
LINE 4 – PLAN __________________________________________ (Fire Plan Designation)
LINE 5 – UNIT DESIGNATORS _____________________________ (Section, Platoon, Battery/Company, Battalion/Regiment and Regiment/Brigade/Division Designators, or Ship Call Sign(s))
LINE 6 – START _________________________________________ (Reservation Start Time in Minutes)
LINE 7 – STOP __________________________________________ (Reservation Stop Time in Minutes)

**Repeat lines 5 through 7 to provide reservation information on multiple fire units. Assign sequential line numbers to succeeding iterations; for example, first iteration 5 through 7; second iteration 5a through 7a; third iteration 5b through 7b, and so on.

LINE 8 – NARRATIVE ____________________________________ (Free Text for Additional Information Required for Clarification of Report)
LINE 9 – AUTHENTICATION ________________________________ (Report Authentication)
GENERAL INSTRUCTIONS: Use to disseminate analysis criteria for nuclear target analysis, chemical target analysis, nuclear fire planning, and fallout prediction. Reference: FM 6-20.

LINE 1 – DATE AND TIME ________________ (DTG)
LINE 2 – UNIT ________________ (Unit Making Report)
LINE 3 – POI ________________ (Primary Option Indicator. Enter ADD, AMEND, or CANCEL)
LINE 4 – PLAN ________________ (Fire Plan Designation)
LINE 5 – TIME ________________ (DTG of Fire Plan)
LINE 6 – TARGET NO. ________________ (Fire Support Target Number)
LINE 7 – UNIT DESIGNATORS ________________ (Section, Platoon, Battery/Company, Battalion/Regiment and Regiment/Brigade/Division Designators)
LINE 8 – CIRCULAR ERROR PROBABLE ________________ (Nuclear Target Analysis Circular Error Probable)
LINE 9 – ZONE ________________ (Zone of Fire Responsibility)
LINE 10 – EXCEPTION ________________ (Nuclear Target Analysis Exception Indicator)
LINE 11 – EXCEPTION ________________ (Nuclear Target Analysis Exception Indicator)
LINE 12 – EXCEPTION ________________ (Nuclear Target Analysis Exception Indicator)
LINE 13 – EXCEPTION ________________ (Nuclear Target Analysis Exception Indicator)
LINE 14 – AREA ________________ (Required Coverage for Area Targets)
LINE 15 – CRITERIA ________________ (Personnel Radiation Casualty Criteria)

*Continued on next page.*
TITLE: FIRE SUPPORT ELEMENT-COMMANDER'S CRITERIA [FSE.CRITER]
(CONTINUED)
REPORT NUMBER: F035 {USMTF # E273}

LINE 16 – PRIMARY__________________________ (Primary Target Category)

LINE 17 – PROBABILITY______________________ (Required Probability for Point Targets)

LINE 18 – DAMAGE__________________________ (Material Damage Level)

LINE 19 – VULNERABILITY____________________ (Troop Safety Vulnerability Category)

LINE 20 – RISK______________________________ (Troop Safety Risk Category)

LINE 21 – VEGETATION________________________ (Vegetation Flammability Category Designator and Forest Type)

LINE 22 – MAXIMUM YIELD____________________ (Maximum Yield to be Considered)

LINE 23 – MINIMUM DISTANCE________________ (Minimum Distance Allowable for Scheduling (Adjusted))

LINE 24 – PRECIPITATION____________________ (Precipitation Indicator)

LINE 25 – WEAPON__________________________ (Surface-to-Surface Weapon Type)

LINE 26 – MAX VOLLEYS______________________ (Maximum Number of Volleys per Fire Unit)

LINE 27 – CHEMICAL MINIMUM________________ (Minimum Allowable Chemical Effects)

LINE 28 – OPTIMUM__________________________ (Optimum Chemical Effects)

LINE 29 – MAX CHEM_________________________ (Maximum Allowable Chemical Effects and Persistent Indicator)

LINE 30 – NARRATIVE________________________ (Free Text for Additional Information Required for Clarification of Report)

LINE 31 – AUTHENTICATION____________________ (Report Authentication)
TITLE: FIRE SUPPORT ELEMENT-FRIENDLY UNIT LOCATION [FSE.FRD]
REPORT NUMBER: F040 {USMTF # B260}

GENERAL INSTRUCTIONS: Use to report information concerning friendly unit locations and status (for other than organic artillery and NSF units) to facilitate NBC vulnerability analysis. Reference: FM 6-20.

LINE 1 – DATE AND TIME __________________________________ (DTG)
LINE 2 – UNIT ______________________________________________ (Unit Making Report)
LINE 3 – POI ________________________________________________ (Primary Option Indicator. Enter ADD, AMEND, or CANCEL)
LINE 4 – UNIT DESIGNATORS _______________________________ (Section, Platoon, Battery/Company, Battalion/Regiment and Regiment/Brigade/Division Designators)
LINE 5 – AIR UNIT DESIGNATORS ___________________________ (Friendly Unit Designator – Used Only for Air Units)
LINE 6 – SHIP CALL SIGN ___________________________________ (Fire Support Ship Call Sign(s))
LINE 7 – PLAN _____________________________________________ (Fire Plan Designation)
LINE 8 – ZONE ____________________________________________ (UTM Grid Zone and 100-KM Square)
LINE 9 – GRID ______________________________________________ (UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator)

OR (IF NECESSARY)

LINE 10 – LAT/LONG __________________________________________ (Unit Location, LAT/LONG)
LINE 11 – TYPE/SUBTYPE ___________________________________ (Friendly Unit Type, Friendly Unit Subtype)
LINE 12 – PROTECTION ______________________________________ (Degree of Personnel Protection)
LINE 13 – RADIUS __________________________________________ (Friendly Unit Radius in Meters)
LINE 14 – LENGTH __________________________________________ (Friendly Unit Length in Meters)

**Continued on next page.
TITLE: FIRE SUPPORT ELEMENT-FRIENDLY UNIT LOCATION [FSE.FR] (CONTINUED)
REPORT NUMBER: F040 {USMTF # B260}

LINE 15 – WIDTH __________________________________________ (Friendly Unit Width in Meters)
LINE 16 – ATTITUDE _______________________________________ (Target Attitude in Mils)
LINE 17 – SAFETY VULNERABILITY _________________________ (Troop Safety Vulnerability Category)
LINE 18 – SAFETY RISK ____________________________________ (Troop Safety Risk Category)
LINE 19 – RADIATION STATUS ______________________________ (Nuclear Radiation Exposure Status)
LINE 20 – NUC VULNERABILITY ____________________________ (Nuclear Vulnerability Category)
LINE 21 – NARRATIVE _____________________________________ (Free Text for Additional Information Required for Clarification of Report)
LINE 22 – AUTHENTICATION _______________________________ (Report Authentication)
TITLE: FLIGHT CONTROL INFORMATION [FLTCONTINFO]
REPORT NUMBER: F045 {USMTF # F632}

GENERAL INSTRUCTIONS: Use to provide control and coordination information for aircraft entering another service or component’s airspace. Reference: FM 100-103-1.

LINE 1 – DATE AND TIME ________________________________ (DTG)
LINE 2 – UNIT ________________________________________ (Unit Making Report)
LINE 3 – PLAN _________________________________________ (Flight Plan Designation)
LINE 4 – MISSION ______________________________________ (Mission Number)
LINE 5 – STATUS ______________________________________ (Status of Flight Plan: APPROVED Or DISAPPROVED)
LINE 6 – CONTROL ____________________________________ (Type Control: INITIAL, FINAL, COORDINATION, MONITOR)
LINE 7 – CALL SIGN ________________________________ (Call Sign of Control Agency)
LINE 8 – PRIMARY ________________________________ (Primary Frequency or Frequency Designator)
LINE 9 – SECONDARY ________________________________ (Secondary Frequency or Frequency Designator)
LINE 10 – POSITION __________________________________ (UTM or Six-Digit Grid Coordinate With Grid Zone Designator at Which the Aircraft Should Contact the Control Agency)
LINE 11 – CONTROL ________________________________ (Type Control: INITIAL, FINAL, COORDINATION, MONITOR)
LINE 12 – CALL SIGN ________________________________ (Call Sign of Control Agency)
LINE 13 – PRIMARY ________________________________ (Primary Frequency or Frequency Designator)
LINE 14 – SECONDARY ________________________________ (Secondary Frequency or Frequency Designator)

**Continued on next page.
TITLE: FLIGHT CONTROL INFORMATION [FLTCONTINFO] (CONTINUED)
REPORT NUMBER: F045 {USMTF # F632}

LINE 15 – POSITION ________________________________________ (UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator at Which the Aircraft Should Contact the Control Agency)

LINE 16 – CONTROL _______________________________________ (Type Control: INITIAL, FINAL, COORDINATION, MONITOR)

LINE 17 – CALL SIGN ______________________________________ (Call Sign of Control Agency)

LINE 18 – PRIMARY ________________________________________ (Primary Frequency or Frequency Designator)

LINE 19 – SECONDARY _____________________________________ (Secondary Frequency or Frequency Designator)

LINE 20 – POSITION ________________________________________ (UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator at Which the Aircraft Should Contact the Control Agency)

LINE 21 – CONTROL _______________________________________ (Type Control: INITIAL, FINAL, COORDINATION, MONITOR)

LINE 22 – CALL SIGN ______________________________________ (Call Sign of Control Agency)

LINE 23 – PRIMARY ________________________________________ (Primary Frequency or Frequency Designator)

LINE 24 – SECONDARY _____________________________________ (Secondary Frequency or Frequency Designator)

LINE 25 – POSITION ________________________________________ (UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator at Which the Aircraft Should Contact the Control Agency)

LINE 26 – CONTROL _______________________________________ (Type Control: INITIAL, FINAL, COORDINATION, MONITOR)

**Continued on next page.**
TITLE: FLIGHT CONTROL INFORMATION [FLTCONTINFO] (CONTINUED)
REPORT NUMBER: F045 {USMTF # F632}

LINE 27 – CALL SIGN ________________________________ (Call Sign of Control Agency)

LINE 28 – PRIMARY ____________________________________ (Primary Frequency or Frequency Designator)

LINE 29 – SECONDARY __________________________________ (Secondary Frequency or Frequency Designator)

LINE 30 – POSITION ___________________________________ (UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator at Which the Aircraft Should Contact the Control Agency)

LINE 31 – CONTROL ____________________________________ (Type Control: INITIAL, FINAL, COORDINATION, MONITOR)

LINE 32 – CALL SIGN ________________________________ (Call Sign of Control Agency)

LINE 33 – PRIMARY ____________________________________ (Primary Frequency or Frequency Designator)

LINE 34 – SECONDARY __________________________________ (Secondary Frequency or Frequency Designator)

LINE 35 – POSITION ___________________________________ (UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator at Which the Aircraft Should Contact the Control Agency)

LINE 36 – NARRATIVE __________________________________ (Free Text for Additional Information Required for Clarification of Report)

LINE 37 – AUTHENTICATION ____________________________ (Report Authentication)
# GENERAL INSTRUCTIONS
Use to send timely changes of existing orders to subordinate and supporting commanders while providing notification to higher and adjacent commands. Send FLASH precedence O&I or CMD IAW unit SOPs. Reference: FM 101-5.

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<th>Line 1</th>
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<td>Line 3</td>
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<td>Line 4</td>
<td>References (Changes to OPORD Only)</td>
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<td>Line 5</td>
<td>Time Zone (Time Zone Used in FRAGO)</td>
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<td>Situation (Mandatory Include Changes)</td>
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<td>Line 8</td>
<td>Execution – Intent (Optional)</td>
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<td>Line 9</td>
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<td>Line 10</td>
<td>Command and Signal (With Changes)</td>
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<td>Line 11</td>
<td>Acknowledge (Mandatory)</td>
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<td>Line 12</td>
<td>CDR Name, Rank (Commander’s Name and Rank)</td>
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<td>Line 13</td>
<td>Official (Optional)</td>
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<td>Distribution (Optional)</td>
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<tr>
<td>Line 16</td>
<td>Narrative (Free Text for Additional Information Required for Clarification of Report)</td>
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<tr>
<td>Line 17</td>
<td>Authentication (Report Authentication)</td>
</tr>
</tbody>
</table>
TITLE: FRIENDLY NUCLEAR STRIKE WARNING [STRIKWARN (NUC)]
REPORT NUMBER: F055 {USMTF # C505}

GENERAL INSTRUCTIONS: Use to provide friendly forces with the necessary information to take safety precautions against the effects of friendly nuclear blasts. Reference: ATP-45 (A), FM 3-3-1, and FM 3-4.

LINE 1 – DATE AND TIME __________________________________ (DTG)
LINE 2 – UNIT _______________________________________________ (Unit Making Report)
LINE 3 – ALFA WHISKEY _______________________________________ (Target Number or Target Nickname)
LINE 4 – DELTA WHISKEY______________________________________ (DTG of Strike and DTG Strike Cancelled)
LINE 5 – FOXTROT ONE _________________________________________ (Minimum Safe Distance 1 in Hundreds of Meters, Followed by Coordinates of Ground Zero or DGZ, or Coordinates Which Describe MSD Box ONE for Multiple Nuclear Detonations)
LINE 6 – FOXTROT TWO _________________________________________ (Minimum Safe Distance 2 in Hundreds of Meters, Followed by Coordinates of Ground Zero or DGZ, or Coordinates Which Describe MSD Box TWO for Multiple Nuclear Detonations)
LINE 7 – FOXTROT THREE_______________________________________ (Minimum Safe Distance 3 in Hundreds of Meters, Followed by Coordinates of Ground Zero or DGZ, or Coordinates Which Describe MSD Box THREE for Multiple Nuclear Detonations)
LINE 8 – GOLF _______________________________________________ (Means of Delivery/ROTA Classification)
LINE 9 – HOTEL WHISKEY______________________________________(Number of Surface Bursts)
LINE 10 – INDIA WHISKEY______________________________________ (Number of Bursts if Multiple Strike)

**Continued on next page.
TITLE: FRIENDLY NUCLEAR STRIKE WARNING [STRIKWARN (NUC)] (CONTINUED)
REPORT NUMBER: F055 {USMTF # C505}

LINE 11 – NARRATIVE ____________________________ (Free Text for Additional Information Required for Clarification of Report)

LINE 12 – AUTHENTICATION ____________________________ (Report Authentication)
GENERAL INSTRUCTIONS: Use to pass information not found in any other FM 101-5-2 report and message format. Use for free text message as required. Reference: FM 101-5.

LINE 1 – DATE AND TIME ________________________________ (DTG)
LINE 2 – UNIT ________________________________ (Unit Making Report)
LINE 3 – REFERENCE ________________________________ (If Applicable, DTG of Referenced Report or Document)
LINE 4 – SUBJECT ________________________________ (Subject Matter of This Report)
LINE 5 – NARRATIVE ________________________________ (Free Text for Additional Information Required for Clarification of Report)
LINE 6 – AUTHENTICATION ________________________________ (Report Authentication) .
GENERAL INSTRUCTIONS: Use to initiate and complete a handover from ADA command and control link to another. Reference: FM 44-100.

LINE 1 – DATE AND TIME ________________________________ (DTG)
LINE 2 – UNIT ________________________________ (Unit Making Report)
LINE 3 – CALL SIGN ________________________________ (Call Sign of Aircraft or Flight to Handover)
LINE 4 – PRESENT POSITION ________________________________ (Aircraft Position in UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator)
LINE 5 – HEADING ________________________________ (Heading in Degrees Magnetic)
LINE 6 – ALTITUDE ________________________________ (Aircraft Altitude in Nearest 1,000 Feet)
LINE 7 – MISSION ________________________________ (Mission Number of Aircraft/Flight)
LINE 8 – NO. TYPE ________________________________ (Number and Type of Aircraft)
LINE 9 – SQUAWKING ________________________________ (IFF/SIF Mode and Code)
LINE 10 – SPEED ________________________________ (Speed in Knots if on an Intercept)
LINE 11 – ENGAGED ________________________________ (Paired/Engaged Status if on an Intercept)
LINE 12 – WEAPON ________________________________ (Weapon Status if on an Intercept)
LINE 13 – FUEL ________________________________ (Fuel Remaining in Hundreds of Pounds)
LINE 14 – TIME TO BINGO ________________________________ (Time in Hours and Minutes Until BINGO Fuel)
LINE 15 – TADIL ________________________________ (TADIL Address)

**Continued on next page.**
TITLE: HANDOVER REPORT [HANDOVER] (CONTINUED)  
REPORT NUMBER: H001 {USMTF # E706}

LINE 16 – TARGET ________________________________ (Destination Target to Include Intermediate Points in UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator)

***Lines 7 through 16 are amplifying information to be provided as desired.

LINE 17 – CONFIRM FREQUENCY ___________________________ (Frequency Designator)

LINE 18 – SEND ___________________________________________ (Call Sign of Aircraft or Flight Being Handed Over)

LINE 19 – FREQUENCY _____________________________________ (Frequency Designator for Pilot to Contact Receiving Control Agency)

LINE 20 – ASSIGNED SQUAWK______________________________ (IFF/SIF Mode and Code to be Assigned after Transfer)

LINE 21 – TIME ____________________________________________ (DTG that Handover is Effective)

LINE 22 – POSITION ________________________________________ (UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator)

***After the controlling agency contacts the pilot, he makes successful contact with the receiving agency; the receiving agency confirms transfer of control.

***The receiving agency passes the information in line 25 to the controlling agency.

__________THIS IS_________________________ HAVE CONTROL OF

LINE 23 – CALL SIGN ________________________________ (Call Sign of Aircraft or Flight Handed Over)

LINE 24 – NARRATIVE ________________________________ (Free Text for Additional Information Required for Clarification of Report)

LINE 25 – AUTHENTICATION ____________________________ (Report Authentication)
GENERAL INSTRUCTIONS: Use to provide data about main supply routes (MSRs) to include MSR capabilities, choke points, and units affected. Reference: FM 17-95 and FM 701-58.

LINE 1 – DATE AND TIME ___________________________ (DTG)
LINE 2 – UNIT ____________________________________ (Unit Making Report)
LINE 3 – ROUTE ____________________________________ (Main Supply Route Name and Number)
LINE 4 – EFFECTIVE ________________________________ (DTG Zone the Data is Effective)
LINE 5 – FROM ____________________________________ (UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator)
LINE 6 – TO _______________________________________ (UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator)
LINE 7 – DISTANCE _________________________________ (Distance in Kilometers Between the From and To Locations)
LINE 8 – NARRATIVE ________________________________ (Free Text for Additional Information Required for Clarification of Report)
LINE 9 – AUTHENTICATION __________________________ (Report Authentication)
TITLE: HUMAN REMAINS SEARCH AND RECOVERY STATUS REPORT
[REMAINSARSTAT]
REPORT NUMBER: H010 {USMTF # B965}

GENERAL INSTRUCTIONS: Use to report the status of searching for and recovering human remains within an assigned area of responsibility. Reference: FM 10-63-1 and FM 10-286.

LINE 1 – DATE AND TIME ________________________________ (DTG)

LINE 2 – UNIT ___________________________________________ (Unit Making Report)

LINE 3 – EFFECTIVE DTG______________________________ (DTG the Information is Effective)

LINE 4 – STATUS ________________________________ (Enter BEGAN, COMPLETE, INCOMPLETE, DELAYED, HALTED, or PERFORMING to Indicate Search and Recovery Status)

LINE 5 – COORDINATES ________________________________ (UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator)

**Send additional iterations of Line 5 as required. Number additional coordinate lines as 5a, 5b, 5c, and so on.

LINE 6 – RESULTS ______________________________________ (Accomplishments Achieved From Search)

LINE 7 – REMAINS ______________________________________ (Enter the Identification of the Remains Recovered)

LINE 8 – NARRATIVE ____________________________________ (Free Text for Additional Information Required for Clarification of Report)

LINE 9 – AUTHENTICATION ______________________________ (Report Authentication)
FM 101-5-2

TITLE: INTELLIGENCE REPORT [INTREP]
REPORT NUMBER: I001 {USMTF # C110}

GENERAL INSTRUCTIONS: Use to provide the exchange of information obtained through tactical
collection efforts regarding events that could have an immediate and significant effect on current planning
and operations of timely interest, such as the primary means of reporting HUMINT or counterintelligence

LINE 1 – DATE AND TIME ________________________________ (DTG)
LINE 2 – UNIT ________________________________ (Unit Making Report)
LINE 3 – SIZE ________________________________ (Enemy Strength/Size/Number)
LINE 4 – ACTIVITY ________________________________ (Enemy Activity Description,
Including Direction and Speed if Moving)
LINE 5 – LOCATION ________________________________ (UTM or Six-Digit Grid
Coordinate With MGRS Grid Zone Designator)
LINE 6 – UNIT ________________________________ (Enemy Nationality, Unit
Designator/Name/Type)
LINE 7 – TIME ________________________________ (DTG of Activity)
LINE 8 – EQUIPMENT ________________________________ (Major Enemy Equipment)
LINE 9 – SOURCES ________________________________ (Reliability Rating of Source
and Credibility Rating of Information)
LINE 10 – EVALUATION ________________________________ (Evaluation of Source,
Information, and BDA)
LINE 11 – CONCLUSION ________________________________ (Reporter’s Analysis of What
Reported Information Means)
LINE 12 – NARRATIVE ________________________________ (Free Text for Additional
Information Required for Clarification of Report)
LINE 13 – AUTHENTICATION ________________________________ (Report Authentication)
GENERAL INSTRUCTIONS: Use (1) to summarize significant enemy activities, (2) to report analysis of the current situation, and (3) to assess probable enemy courses of action in an area of operation. Send on O&I net as ROUTINE IAW unit SOPs or via liaison officer, courier, or digital routine precedence. Also, when sent graphically, this format represents a Graphic Summary. Use the Graphic Summary to graphically display (INSUM). Reference: FM 34-3.

LINE 1 – DATE AND TIME ____________________________ (DTG)
LINE 2 – UNIT ________________________________ (Unit Making Report)
LINE 3 – SITUATION _______________________________ (General Enemy Situation Since Last Report (Deep, Close, Rear, Adjacent Units))
LINE 4 – EFLOT ________________________________ (Current Enemy Front Line Trace)
LINE 5 – ENEMY UNIT SIZE ________________________ (Enemy Ground Maneuver Units LOCATION/ACTIVITY/Status by Echelon/Size, Location EST STRENGTH (Grid), Activity, Estimated Strength)
LINE 6 – ENEMY ARTILLERY ________________________ (Enemy Artillery Activity and Estimated Strength)
LINE 7 – ENEMY NBC ______________________________ (Enemy NBC Activity (Type, Location, DTG))
LINE 8 – ENEMY AIR ______________________________ (Enemy Air and Air Activity)
LINE 9 – ENEMY ENGINEER _________________________ (Enemy Engineer Activity)
LINE 10 – REAR AREA THREAT ______________________ (Enemy Rear Area Threat (Light Forces, SF))
LINE 11 – ENEMY’S EST COA _______________________ (Enemy’s Most Probable Courses of Action)
LINE 12 – PIR ________________________________ (Current PIR in Order of Priority and the Phase of Operation)

**Continued on next page.**
TITLE: INTELLIGENCE SUMMARY [INSUM] (CONTINUED)
REPORT NUMBER: I002

LINE 13 – ENEMY CS _______________________________________ (Location and Activity of Enemy Combat Support Units)

LINE 14 – ENEMY CSS ______________________________________ (Location and Activity of Enemy Combat Service Support Units)

LINE 15 – VULNERABILITIES _______________________________ (Analysis of Enemy’s Current or Emerging Vulnerabilities)

LINE 16 – WEATHER AND TERRAIN _________________________ (Analysis of Effects of Weather and Terrain)

LINE 17 – ENEMY BDA _____________________________________ (Summarize Enemy BDA During Period)

LINE 18 – NARRATIVE _____________________________________ (Free Text for Additional Information Required for Clarification of Report)

LINE 19 – AUTHENTICATION _______________________________ (Report Authentication)
TITLE: LOGISTICS RESUPPLY REQUEST [LOGRESREP]
REPORT NUMBER: L001

GENERAL INSTRUCTIONS: Use to convey to S4/G4 and logistical commander request of supplies and equipment prior to the next scheduled resupply. Use to request support in a tactical emergency or for urgent tactical requirements. Send normal or routine requirements through the LOGISTICS SITUATION REPORT. Use this format for all types of emergency or urgent supply requests (include water, barrier materiel, blade support, etc). Reference: FM 700-80 and FM 701-58.

LINE 1 – DATE AND TIME ____________________________ (DTG)

LINE 2 – UNIT ____________________________ (Unit Making Report)

LINE 3 – CLASS I ____________________________ (Number of Meals or Water Required Before Next Scheduled Resupply. State Precedence.)

LINE 4 – CLASS III ____________________________ (Type and Amount of POL Required Before Next Resupply. State Precedence.)

LINE 5 – CLASS V ____________________________ (Type and Amount of Ammunition Required Before Next Resupply. State Precedence.)

LINE 6 – MAINTENANCE ____________________________ (Number and Quantity by Line Number of Parts and/or Equipment Required Before Next Resupply. State Precedence.)

LINE 7 – MEDICAL ____________________________ (Number and Type of Medical Equipment/Medical Support Required Before Next Resupply. State Precedence.)

LINE 8 – OTHER ____________________________ (Number and Type of Supplies Not Listed Above and Required Before the Next Resupply. State Precedence.)

LINE 9 – RESUPPLY LOCATION ____________________________ (UTM or Six-Digit Grid Coordinate With Grid Zone Designator for Location of Resupply Requested)

**Continued on next page.
TITLE: LOGISTICS RESUPPLY REQUEST [LOGRESREP] (CONTINUED)
REPORT NUMBER: L001

LINE 10 – SUPPLY STAT ______________________________ (Status of UNIT (Red, Amber, Green))

LINE 11 – NARRATIVE _________________________________ (Free Text for Additional Information Required for Clarification of Report)

LINE 12 – AUTHENTICATION ____________________________ (Report Authentication)
GENERAL INSTRUCTIONS: Use to report logistic problems, required logistic assistance and reallocation, and recommended or intended courses of actions. Reference: FM 700-80 and FM 701-58.

LINE 1 – DATE AND TIME ________________________________ (DTG)

LINE 2 – UNIT __________________________________________ (Unit Making Report)

LINE 3 – MAP ___________________________________________ (UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator for the Map Being Referenced)

LINE 4 – EVALUATION ___________________________________ (Major Units, Combat Operation Type, and Days Logistically Supportable)

UNIT__________________OPERATION___________________DAYS__________
UNIT__________________OPERATION___________________DAYS__________
UNIT__________________OPERATION___________________DAYS__________

LINE 5 – IDENTIFICATION _________________________________ (Identification/Designation of Component, Agency, or Unit Making Report)

LINE 6 – LOCATION ________________________________________ (UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator)

LINE 7 – COMMENT _______________________________________ (Pertinent Unit Comments)

LINE 8 – FORCE WEAPON SYSTEMS _________________________ (Line Item Numbers and Quantities on Hand, Authorized, and Operational)

LINE________ON HAND________AUTH______OPER_____REQ_____
LINE________ON HAND________AUTH______OPER_____REQ_____
LINE________ON HAND________AUTH______OPER_____REQ_____

**Continued on next page.**
**CONTINUED ON NEXT PAGE.**
TITLE: LOGISTICS SITUATION REPORT [LOGSITREP] (CONTINUED)
REPORT NUMBER: L005 {USMTF # C802}

LINE 14 – REPAIR MATERIEL _______________________________ (Type, National Stock Number, and Quantity of Critically Required Repair Materiel)

TYPE______________NSN_________________________QTY_______________REQ_____
TYPE______________NSN_________________________QTY_______________REQ_____
TYPE______________NSN_________________________QTY_______________REQ_____

LINE 15 – RATIONS ________________________________________ (Ration Type, Number of Meals on Hand, and Days of Supply on Hand)

TYPE_______________ON HAND________________________DAYS_________REQ_____
TYPE_______________ON HAND________________________DAYS_________REQ_____
TYPE_______________ON HAND________________________DAYS_________REQ_____

LINE 16 – WATER __________________________________________ (Water Type (Potable or Nonpotable) Gallons Available, and Days of Supply on Hand)

TYPE___________________GALLONS_____________________DAYS_________REQ_____
TYPE___________________GALLONS_____________________DAYS_________REQ_____
TYPE___________________GALLONS_____________________DAYS_________REQ_____

**Repeat lines 5 through 16 to indicate each type of equipment. Assign sequential line numbers to succeeding iterations; for example, first iteration 5 through 16; second iteration 5a through 16a; third iteration 5b through 16b; and so on.

LINE 17 – CDR'S SUMMARY ________________________________ (Narrative Comments Addressing Degraded Capabilities, Shortages, or Problems Impacting on Warfighting Capability as well as Recommended Courses of Action)

LINE 18 – NARRATIVE ________________________________ (Free Text for Additional Information Required for Clarification of Report)

LINE 19 – AUTHENTICATION _______________________________ (Report Authentication)
TITLE: LOST SENSITIVE ITEM REPORT [LOSTITEM]
REPORT NUMBER: L010

GENERAL INSTRUCTIONS: Use—usually by the Provost Marshall—to summarize unit’s loss of sensitive items. Send IAW unit SOPs. References FM 19-1.

LINE 1 – DATE AND TIME ________________________________ (DTG)
LINE 2 – UNIT _________________________________________ (Unit Making Report)
LINE 3 – SUMMARY _____________________________________ (Summary of Loss)

<table>
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<tr>
<th>UNIT</th>
<th>ITEMS LOST</th>
<th>SERIAL NO.</th>
<th>ACTION TAKEN</th>
<th>DTG LOSS</th>
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LINE 4 – PM ASSESSMENT__________________________________

LINE 5 – NARRATIVE ________________________________ (Free Text for Additional Information Required for Clarification of Report)

LINE 6 – AUTHENTICATION ________________________________ (Report Authentication)
TITLE: MAIL DISTRIBUTION SCHEME CHANGE [MAILDISTCH]
REPORT NUMBER: M001 {USMTF # F882}

GENERAL INSTRUCTIONS: Use to establish and change mail routing for assigned or co-located units. Reference: FM 12-6.

LINE 1 – DATE AND TIME __________________________________ (DTG)
LINE 2 – UNIT _____________________________________________ (Unit Making Report)
LINE 3 – GAINING NUMBER ________________________________ (Number of the Facility Gaining Responsibility)
LINE 4 – GAINING LOCATION _______________________________ (Place Name for the Facility Gaining Responsibility)
LINE 5 – EFFECTIVE DATE _________________________________ (DTG the Change in Mail Distribution Will be Effective)
LINE 6 – LOSING NUMBER _________________________________ (Number of the Facility Losing Responsibility)
LINE 7 – LOSING LOCATION ________________________________ (Place Name for the Facility Losing Responsibility)
LINE 8 – EFFECTIVE DATE _________________________________ (DTG the Change in Losing Facility Will be Effective)
LINE 9 – FOOTNOTE CODES ________________________________ (Letter(s) or Letter-Number(s) of Applicable Postal Footnote(s))
LINE 10 – GAINING FACILITY _______________________________ (Location Name of the Affected Military Post Office)
LINE 11 – MAIL CLASS ___________________________________ (Mail Classification Code(s) Permitted at the Location Named in Line 9 (if not ALL, Also Provide Required Disposition of Mail Classifications not Permitted))
LINE 12 – NARRATIVE _____________________________________ (Free Text for Additional Information Required for Clarification of Report)
LINE 13 – AUTHENTICATION _______________________________ (Report Authentication)
TITLE: MAINTENANCE SUPPORT REQUEST [MAINTSPREQ]
REPORT NUMBER: M005 {USMTF # D840}


LINE 1 – DATE AND TIME ________________________________ (DTG)

LINE 2 – UNIT ________________________________ (Unit Making Report)

LINE 3 – REQUESTING AGENCY ____________________________ (Identifier or Designator of the Requesting Agency)

LINE 4 – LOCATION ________________________________ (UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator)

LINE 5 – DATE ________________________________ (Date Maintenance Support is Required)

LINE 6 – NOMENCLATURE ________________________________ (Category, Name, and Model of Equipment Requiring Maintenance Support)

LINE 7 – NO. PIECES ________________________________ (Number of Pieces of Equipment Requiring Maintenance Support)

LINE 8 – TYPE ________________________________ (Type of Maintenance Support Required)

**Repeat lines 3 through 8 for each type of equipment requiring maintenance support. Assign sequential line numbers to succeeding iterations; for example, first iteration 3 through 8; second iteration 3a through 8a, and so on.

LINE 9 – EQUIPMENT LOCATION ________________________________ (Location of Equipment Needing Support Using UTM or Six-Digit Grid Coordinate With Grid Zone Designator)

LINE 10 – CONDITION ________________________________ (Brief Description of Equipment Condition)

LINE 11 – SPECIAL INSTRUCTIONS ________________________________ (Special Instructions Relevant to Special Tools, Components Needed to Perform Support)

**Continued on next page.
TITLE: MAINTENANCE SUPPORT REQUEST [MAINTSPTREQ] (CONTINUED)
REPORT NUMBER: M005 {USMTF # D840}

LINE 12 – COORDINATION _________________________________ (Coordination Instructions Required Between Supported and Supporting Units)

LINE 13 – NARRATIVE _________________________________ (Free Text for Additional Information Required for Clarification of Report)

LINE 14 – AUTHENTICATION _______________________________ (Report Authentication)
TITLE: MAINTENANCE SUPPORT RESPONSE [MAINTSPTRES]
REPORT NUMBER: M010 {USMTF # D841}

GENERAL INSTRUCTIONS: Use to reply to a request for maintenance support. Reference: FM 9-43-1.

LINE 1 – DATE AND TIME _____________________________ (DTG)

LINE 2 – UNIT _________________________________________ (Unit Making Report)

LINE 3 – REFERENCE ________________________________ (DTG and Other Identifying Information of Communications Which Requested Maintenance Support)

LINE 4 – DISPOSITION ________________________________ (Status of Request: APPROVED, DISAPPROVED, MODIFIED)

LINE 5 – SUPPORTING UNIT ___________________________ (Identifier or Designator of Supporting Unit)

LINE 6 – LOCATION _________________________________ (UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator)

LINE 7 – PRIORITY _________________________________ (Priority of Maintenance Support Mission)

LINE 8 – START ___________________________________(DTG the Requested Support Will Start)

LINE 9 – COMPLETE __________________________________(Estimated DTG Support Mission Will be Completed)

LINE 10 – INSTRUCTIONS _____________________________(Special Instructions Relevant to Support Required by the Supporting Unit)

LINE 11 – COORDINATION ____________________________ (Coordination Instructions Required Between Supporting Units)

**Lines 5 through 11 are applicable only if line 4 is approved or modified.

LINE 12 – NARRATIVE ________________________________ (Free Text for Additional Information Required for Clarification of Report)

LINE 13 – AUTHENTICATION __________________________ (Report Authentication)
GENERAL INSTRUCTIONS: Use to provide initial notification (report) of a major ammunition malfunction. Reference: FM 9-6.

LINE 1 – DATE AND TIME ________________________________ (DTG)
LINE 2 – UNIT ________________________________ (Unit Making Report)
LINE 3 – ORIGINATING UNIT ________________________________ (Identifier for the Unit Making the Report)
LINE 4 – DATE-TIME ________________________________ (DTG at Which the Incident Occurred)
LINE 5 – LOCATION STATUS ________________________________ (Status of the Location at Which the Incident Occurred)
LINE 6 – INSTALLATION TYPE ________________________________ (Type of Installation or Location at Which Incident Occurred)
LINE 7 – LOCATION DESIGNATOR ________________________________ (UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator of the Incident)
LINE 8 – COUNTRY ________________________________ (Country or Geographical-Political Pact of the Organization Involved in the Incident)
LINE 9 – UTM ________________________________ (UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator)

**Repeat line 9 as often as necessary to enter the UTM grid reference points.

LINE 10 – MALFUNCTION ________________________________ (Enter Details and Cause of Malfunction (See NOTE 1))
LINE 11 – DAMAGES/CASUALTIES ________________________________ (Casualty and Damage Information)

**Continued on next page.
TITLE: MAJOR AMMUNITION MALFUNCTION-INITIAL REPORT
[AMMOMALFUNCREP] (CONTINUED)
REPORT NUMBER: M015 {USMTF # C201}

LINE 12 – STOCK NUMBER/CODE ___________________________ (National Stock Number,
NATO Stock Number or
National Short Code)

LINE 13 – BATCH _________________________________________ (Batch Number of the
Ammunition)

LINE 14 – LOT ___________________________________________ (Lot Number of the
Ammunition)

LINE 15 – WEAPON ________________________________________ (Identifier of the Generic Type
of Weapon Being Used)

LINE 16 – MODEL _________________________________________ (Exact Weapon Model)

LINE 17 – NUMBER ________________________________________ (Number of Weapons Involved)

**Repeat lines 15 through 17 for each type of weapon. Assign sequential line numbers to succeeding
iterations; for example, first iteration 15 through 17; second iteration 15a through 17a; third iteration 15b
through 17b; and so on.

LINE 18 – WEATHER _______________________________________ (Weather Conditions at Time of
Malfunction)

LINE 19 – RANK ___________________________________________ (Rank or Position of POC)

LINE 20 – SURNAME _______________________________________ (Surname of POC)

LINE 21 – UNIT ____________________________________________ (Unit POC)

LINE 22 – TELEPHONE _____________________________________ (Telephone Number of POC)

LINE 23 – ACTION TAKEN __________________________________ (Enter Information on Action
Taken)

LINE 24 – NARRATIVE _____________________________________ (Free Text for Additional
Information Required for
Clarification of Report)

LINE 25 – AUTHENTICATION _______________________________ (Report Authentication)
GENERAL INSTRUCTIONS: Use to share MIJI incidents in a timely manner and to provide for joint exchange of tactical MIJI information including electro-optic interference. Reference: FM 34-10.

LINE 1 – DATE AND TIME ________________________________ (DTG)

LINE 2 – UNIT ____________________________________________ (Unit Making Report)

LINE 3 – INTERFERENCE ________________________________ (Strength and Characteristics)

LINE 4 – LOCATION ______________________________________ (UTM of Affected Station or Six-Digit Grid Coordinate With MGRS Grid Zone Designator)

LINE 5 – ON TIME ________________________________ (Start DTG)

LINE 6 – OFF TIME ________________________________ (End DTG)

LINE 7 – EFFECTS ______________________________________ (Operations/Equipment Affected)

LINE 8 – FREQUENCY ______________________________________ (Frequency/Frequency Range Affected)

LINE 9 – NARRATIVE ______________________________________ (Free Text for Additional Information Required for Clarification of Report)

LINE 10 – AUTHENTICATION ________________________________ (Report Authentication)
TITLE: MEDIA CONTACT REPORT [MEDIACOTREP]
REPORT NUMBER: M025

GENERAL INSTRUCTIONS: Use to inform commander and staff of noncredentialed, unescorted, or unregistered media in the Division AO. Reference: FM 46-1.

LINE 1 – DATE AND TIME __________________________________ (DTG)
LINE 2 – UNIT _____________________________________________ (Unit Making Report)
LINE 3 – NONACCREDITED MEDIA __________________________ (Number of Any Unescorted, Noncredentialed or Unregistered Media Representatives in AO)

LINE 4 – UNESCORTED MEDIA REPRESENTITIVE____________
   a. N/UMR _________________________________________ (Number Unescorted)
   b. MEDIA AFFILIATION_____________________________ (Country/Agency)
   c. LOCATION____________________________________ (UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator)
   d. REASON FOR DETAINING ________________________ (Unescorted, Noncredentialed, Unregistered)
   e. SOURCE ________________________________________ (Large Circulation Newspaper/Periodical or National Television/YES or NO)
   f. DURATION______________________________________ (Duration in Location in Days (YES or NO))

**Repeat lines 4a through 4f to report additional unescorted representatives. Assign sequential line numbers to succeeding iterations; for example, first iteration 4a through 4f; second iteration 4a1 through 4f1; third iteration 4a2 through 4f2; and so on.

LINE 5 – PAO ASSESSMENT ________________________________ (Public Affairs Officer’s Report)
LINE 6 – NARRATIVE ______________________________________ (Free Text for Additional Information Required for Clarification of Report)
LINE 7 – AUTHENTICATION ________________________________ (Report Authentication)
GENERAL INSTRUCTIONS: Use to request evacuation of sick and wounded personnel by other than USAF fixed-wing assets. Reference: FM 8-10-6.

LINE 1 – DATE AND TIME _____________________________ (DTG)
LINE 2 – UNIT ______________________________________ (Unit Making Report)
LINE 3 – LOCATION __________________________________ (UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator of Pickup Site Location; Encrypt if Using Non-Secure Means of Communication)
LINE 4 – RADIO FREQUENCY ____________________________ (Radio Frequency at Pickup Site; Call Sign, and Suffix)
LINE 5 – NUMBER OF PATIENTS(P)_______________________ (Number of Patients by Precedence. Report Only Applicable Information and Encrypt the Brevity Codes: A – URGENT B – URGENT-SURG C – PRIORITY D – ROUTINE E – CONVENIENCE) If two or more categories must be reported in the same request, insert the word BREAK between each category.)
LINE 6 – SPECIAL EQUIPMENT ______________________________________ (Encrypt the Applicable Brevity Codes. A – None B – Hoist C – Extraction Equipment)
LINE 7 – NUMBER OF PATIENTS(T)_______________________ (Total Number of Patients by Type. L + # of PNT – Litter A + # of PNT – Ambulatory)

**Continued on next page.**
LINE 8 – SECURITY OF PICK-UP SITE ________________________ (N – No Enemy Troops in Area
P – Possibly Enemy Troops in Area (approach with caution)
E – Enemy Troops in Area (approach with caution)
X – Enemy Troops in Area (armed escort required))

LINE 9 – NO. TYPE OF WOUND, INJURY, OR ILLNESS (PEACETIME)
__________________________________________________________ (Specific Information Regarding
Patient Wounds by Type)

LINE 10 – METHOD OF MARKING AT PZ _____________________ (Encrypt the Brevity Codes:
A – Panels
B – Pyrotechnic signal
C – Smoke Signal
D – None
E – Other)

LINE 11 – PATIENT NATIONALITY __________________________ (Number of Patients in Each
Category Need Not be Transmitted. Encrypt Only the Applicable Brevity Codes:
A – US Military
B – US Civilian
C – Non-US Military
D – Non-US Civilian
E – EPW)

LINE 12 – NBC CONTAMINATION ___________________________ (NBC Contamination; Use
Brevity Codes:
N = Nuclear
B = Biological
C = Chemical
U = Unknown
A = All Clear)

LINE 13 – TERRAIN DESCRIPTION ___________________________ (Description of Terrain Features
at the Proposed Pick-up Site)

LINE 14 – AUTHENTICATION _______________________________ (Report Authentication)
TITLE: MEDICAL SITREP [MEDSITREP]
REPORT NUMBER: M035

GENERAL INSTRUCTIONS: Use to convey a quick, consolidated medical status report as a snapshot rather than a full report. Reference: FM 8-10-3.

LINE 1 – DATE AND TIME _________________________________ (DTG)
LINE 2 – UNIT __________________________________________ (Unit Making Report)
LINE 3 – LOCATION______________________________________ (UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator)
LINE 4 – STATUS _________________________________________ (Number of Operational Cots, Unoccupied Cots, Number of Cots Uploaded)
LINE 5 – PATIENTS ________________________________________ (Number of Patients)
LINE 6 – PROJECTED LOCATIONS ___________________________ (Anticipated Operations in the Next 24 Hours; Anticipated Opening and Closing Times at New Locations)
LINE 7 – COMBAT HEALTH LOGISTICS ______________________ (Number of Days Class VIII & Blood OH)
LINE 8 – EVACUATION ASSETS _____________________________ (Availability and Operational Capacity of Evacuation Assets)
LINE 9 – NARRATIVE ______________________________________ (Free Text for Additional Information Required for Clarification of Report)
LINE 10 – AUTHENTICATION _______________________________ (Report Authentication)
GENERAL INSTRUCTIONS: Use to report major medical incidents. Reference: FM 8-10-1.

LINE 1 – DATE AND TIME ________________________ (DTG)
LINE 2 – UNIT ________________________________ (Unit Making Report)
LINE 3 – INCIDENT ____________________________ (DTG of Incident)
LINE 4 – LOCATION ____________________________ (UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator of Emergency)
LINE 5 – EMERGENCY ____________________________ (Specified Medical Emergency)
LINE 6 – UNIT AFFECTED ________________________ (Affected Friendly Unit)
LINE 7 – NARRATIVE ____________________________ (Free Text for Additional Information Required for Clarification of Report)
LINE 8 – AUTHENTICATION ________________________ (Report Authentication)
TITLE: MEDICAL STATUS REPORT [MEDSTAT]
REPORT NUMBER: M045 {USMTF # B907}

GENERAL INSTRUCTIONS: Use to provide status on hospitalization, incidence or occurrence of disease, and unresolved problems or items of significant interest having impact upon the overall medical capability or health of the command. The MEDSTAT report must be repeated in its entirety to report the medical status of ashore or afloat units. Reference: FM 8-10-24.

LINE 1 – DATE AND TIME ________________________________ (DTG)

LINE 2 – UNIT ___________________________________________ (Unit Making Report)

LINE 3 – TYPE ___________________________________________ (Type of Medical Status Report: ASHORE REPORT or AFLOAT REPORT)

LINE 4 – COMMAND _______________________________________ (Name of Designator of Reporting Command or Facility if Ashore; Ship Name, Type and Hull Number)

LINE 5 – POC _____________________________________________ (Name of Medical Point of Contact)

LINE 6 – AVAILABLE ______________________________________ (Number of Cots or Hospital Beds Available)

LINE 7 – OCCUPIED ________________________________________ (Number of Cots or Hospital Beds Occupied)

LINE 8 – OVERFLOW _______________________________________ (Number of Cots/Holding Beds Occupied)

LINE 9 – FULL _____________________________________________ (Number of Cots/Holding Beds Occupied)

LINE 10 – WAITING ________________________________________ (Number of Patients Awaiting Evacuation Out of/From Command's Area of Responsibility Since Last Report)

LINE 11 – MEDLOG ________________________________________ (Number of Days of Class VIII Supplies on Hand)

LINE 12 – PROBLEMS ______________________________________ (Unresolved Problems and Anticipated Problems/Issues Affecting Reporting Command)

**Continued on next page.
TITLE: MEDICAL STATUS REPORT [MEDSTAT] (CONTINUED)
REPORT NUMBER: M045 {USMTF # B907}

LINE 13 – ASSESSMENT ____________________________ (Commanding Officer's
Assessment of Operational
Capabilities and Ability to
Continue Medical Support
(Mandatory Entry))

LINE 14 – NARRATIVE ____________________________ (Free Text for Additional
Information Required for
Clarification of Report)

**Report lines 3 to 14 as a group when reporting the medical status of more than one command, facility,
or ship.

LINE 15 – AUTHENTICATION ____________________________ (Report Authentication)
TITLE: MESSAGE CORRECTION/CANCELLATION [MSGCORRN]
REPORT NUMBER: M050 {USMTF # C002}

GENERAL INSTRUCTIONS: Use to cancel a message, add, delete, or replace information in the referenced message by a message originator. Reference: FM 11-32.

LINE 1 – DATE AND TIME ________________________________ (DTG)
LINE 2 – UNIT ________________________________ (Unit Making Report)
LINE 3 – REPORT ________________________________ (Report Type Referenced)
LINE 4 – ORIGINATOR ________________________________ (Originator of Referenced Report or Order)
LINE 5 – SERIAL ________________________________ (Serial Number of Referenced Report or Order)
LINE 6 – ACTION ________________________________ (Action Directed: CANCEL, ADD, DELETE, or REPLACE)
LINE 7 – NARRATIVE ________________________________ (Free Text for Additional Information Required for Clarification of Report)
LINE 8 – AUTHENTICATION ________________________________ (Report Authentication)
**TITLE: METEOROLOGICAL-COMPUTER MESSAGE [MET.CM]**

**REPORT NUMBER: M055 {USMTF # F254}**

**GENERAL INSTRUCTIONS:** Use to disseminate computer meteorological data for use in fire support technical fire control computations. Reference: FM 6-20 and FM 6-16 through FM 6-16-3.

| LINE 1 – DATE AND TIME ___________________________ (DTG) |
| LINE 2 – UNIT ___________________________ (Unit Making Report) |
| (GLOBAL OCTANT) | (MET STA POSITION OR NAME) | (MET VALIDITY) | (MET STA HEIGHT & PRESSURE) |
| LINE 3 – ALFA ___________________________ |
| (MET.CM ALTITUDE ZONE) | (MET.CM WIND DIR AND SPEED) | (MET.CM AIR VIRTUAL TEMP & PRESSURE) |

Sub-Line 00

Sub-Line 01

Sub-Line 02

Sub-Line 03

Sub-Line 04

Sub-Line 05

Sub-Line 06

Sub-Line 07

Sub-Line 08

Sub-Line 09

Sub-Line 10

Sub-Line 11

Sub-Line 12

Sub-Line 13

**Continued on next page.**
TITLE: METEOROLOGICAL-COMPUTER MESSAGE [MET.CM] (CONTINUED)
REPORT NUMBER: M055 {USMTF # F254}

Sub-Line 14

Sub-Line 15

LINE 4 – NARRATIVE (Free Text for Additional Information Required for Clarification of Report)

LINE 5 – AUTHENTICATION (Report Authentication)
**TITLE:** METEOROLOGICAL-FALLOUT MESSAGE [MET.CF]  
**REPORT NUMBER:** M060 {USMTF # F251}

**GENERAL INSTRUCTIONS:** Use to disseminate fallout meteorological data used in computing fallout predictions and in chemical planning. Reference: FM 6-20 and FM 6-16 through FM 6-16-3

| LINE 1 – DATE AND TIME ________________________________ (DTG) |
| LINE 2 – UNIT ________________________________ (Unit Making Report) |
| (GLOBAL OCTANT) (MET STA POSITION OR NAME) (PERIOD OF VALIDITY) (MET STA HEIGHT & PRESSURE) |

| LINE 3 – ALFA ________________________________ |
| (MET.CF ALTITUDE ZONE) (MET WIND DIRECTION TENS OF MILS) (MET.CF WIND SPEED IN KNOTS) |

Sub-Line 00

Sub-Line 01

Sub-Line 02

Sub-Line 03

Sub-Line 04

Sub-Line 05

Sub-Line 06

Sub-Line 07

Sub-Line 08

Sub-Line 09

Sub-Line 10

Sub-Line 11

Sub-Line 12

Sub-Line 13

**Continued on next page.**
TITLE: METEOROLOGICAL-FALLOUT MESSAGE [MET.CF] (CONTINUED)
REPORT NUMBER: M060 (USMTF # F251)

LINE 4 – NARRATIVE ______________________________________ (Free Text for Additional Information Required for Clarification of Report)

LINE 5 – AUTHENTICATION ________________________________ (Report Authentication)
GENERAL INSTRUCTIONS: Use to disseminate meteorological data for use by target acquisition systems. Reference: FM 6-20 and FM 6-16 through FM 6-16-3.

LINE 1 – DATE AND TIME ________________________________ (DTG)

LINE 2 – UNIT ________________________________ (Unit Making Report)

(GLOBAL (MET STA POSITION (MET (MET STA HEIGHT OCTANT) OR NAME) VALIDITY) & PRESSURE)

LINE 3 – ALFA ________________________________

(CLOUD BASE HEIGHT) (MEAN REFRACTIVE INDEX)

LINE 4 – BRAVO ________________________________

(MET.TA (MET.TA WIND (MET.TA AIR AMBIENT TEMP ALTITUDE ZONE) DIR & SPEED) & RELATIVE HUMIDITY)

Sub-Line 00 ____________________________________________

Sub-Line 01 ____________________________________________

(MET.TA (MET.TA WIND (MET.TA AIR AMBIENT TEMP ALTITUDE ZONE) DIR & SPEED) & RELATIVE HUMIDITY)

Sub-Line 02 ____________________________________________

Sub-Line 03 ____________________________________________

Sub-Line 04 ____________________________________________

Sub-Line 05 ____________________________________________

Sub-Line 06 ____________________________________________

Sub-Line 07 ____________________________________________

Sub-Line 08 ____________________________________________

Sub-Line 09 ____________________________________________

Sub-Line 10 ____________________________________________

**Continued on next page.**
TITLE: METEOROLOGICAL-TARGET ACQUISITION MESSAGE [MET.TA] (CONTINUED)
REPORT NUMBER: M065 {USMTF # F255}

Sub-Line 11

Sub-Line 12

Sub-Line 13

Sub-Line 14

Sub-Line 15

LINE 5 – NARRATIVE ______________________________________ (Free Text for Additional Information Required for Clarification of Report)

LINE 6 – AUTHENTICATION ________________________________ (Report Authentication)
TITLE: MILITARY POSTAL FACILITY REQUEST [POSTREQ]
REPORT NUMBER: M070 {USMTF # D881}

GENERAL INSTRUCTIONS: Use to request authorization to establish or disestablish a military postal facility. Reference: FM 16-1.

LINE 1 – DATE AND TIME ________________________________ (DTG)
LINE 2 – UNIT ________________________________________ (Unit Making Report)
LINE 3 – TYPE FACILITY ________________________________ (Identify the Type Postal Facility Reported)
LINE 4 – DATE (OPENING) (CLOSING) ____________________ (State Whether Proposed Opening or Proposed Closing and the DTG)
LINE 5 – PERSONNEL ________________________________ (Number of Personnel Affected)
LINE 6 – UNITS ________________________________________ (Major Units Affected)
LINE 7 – LOCATION ________________________________ (Enter the Place Name of the Current or Proposed Postal Facility, the UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator)
LINE 8 – JUSTIFICATION ________________________________ (Information to Rationalize the Need to Open or Close a Military Postal Facility)
LINE 9 – NARRATIVE ________________________________ (Free Text for Additional Information Required for Clarification of Report)
LINE 10 – AUTHENTICATION ________________________________ (Report Authentication)

LINE 1 – DATE AND TIME ________________________________ (DTG)
LINE 2 – UNIT ________________________________ (Unit Making Report)
LINE 3 – PLAN ________________________________ (Fire Plan Designation)
LINE 4 – POI ________________________________ (Primary Option Indicator. Enter ADD, AMEND, or CANCEL)
LINE 5 – TARGET ________________________________ (Target Type and Subtype)
LINE 6 – PROTECTION ________________________________ (Degree of Personnel Protection)
LINE 7 – EFFECTS ________________________________ (Effects (Percent Damage) Required)
LINE 8 – VOLLEYS ________________________________ (Fire for Effect Number of Volleys)
LINE 9 – NARRATIVE ________________________________ (Free Text for Additional Information Required for Clarification of Report)
LINE 10 – AUTHENTICATION ________________________________ (Report Authentication)
GENERAL INSTRUCTIONS: Use to disseminate exclusions from tactical fire control consideration for fire missions or specified fire-plan processing. Exclusions include specific weapons of fire units or combinations of shell and fuze by weapon type or fire unit. Reference: FM 6-20 and FM 6-16 through FM 6-16-3.

LINE 1 – DATE AND TIME ________________________________ (DTG)

LINE 2 – UNIT ________________________________________ (Unit Making Report)

LINE 3 – PLAN _________________________________________ (Fire Plan Designation)

LINE 4 – TIME _________________________________________ (DTG of Fire Plan)

LINE 5 – POI __________________________________________ (Primary Option Indicator. Enter ADD, AMEND, or CANCEL)

LINE 6 – EXCLUDE _____________________________________ (Section, Platoon, Battery/Company, Battalion/Regiment, and Regiment/Brigade/Division Designators, or Ship Call Sign(s))

LINE 7 – EXCLUDE _____________________________________ (Section, Platoon, Battery/Company, Battalion/Regiment, and Regiment/Brigade/Division Designators, or Ship Call Sign(s))

LINE 8 – EXCLUDE _____________________________________ (Section, Platoon, Battery/Company, Battalion/Regiment, and Regiment/Brigade/Division Designators, or Ship Call Sign(s))

LINE 9 – EXCLUDE _____________________________________ (Section, Platoon, Battery/Company, Battalion/Regiment, and Regiment/Brigade/Division Designators, or Ship Call Sign(s))

LINE 10 – EXCLUDE ____________________________________ (Section, Platoon, Battery/Company, Battalion/Regiment, and Regiment/Brigade/Division Designators, or Ship Call Sign(s))

**Continued on next page**
TITLE: MODIFICATION-EXCLUDE CRITERIA [MOD.XCLUDE] (CONTINUED)
REPORT NUMBER: M080 {USMTF # E276}

LINE 11 – WEAPON EXCLUDED _____________________________ (Surface-to-Surface Weapon Type)

LINE 12 – WEAPON ________________________________ (Surface-to-Surface Weapon Type)

LINE 13 – PROJECTILE EXCLUDED _____________________________ (Projectile Excluded)

LINE 14 – PROJECTILE ________________________________ (Projectile Excluded)

LINE 15 – PROPELLANT EXCLUDED _____________________________ (Propellant Excluded)

LINE 16 – PROPELLANT ________________________________ (Propellant Excluded)

LINE 17 – FUZE EXCLUDED ________________________________ (Fuze Excluded)

LINE 18 – FUZE ________________________________ (Fuze Excluded)

LINE 19 – NARRATIVE ________________________________ (Free Text for Additional Information Required for Clarification of Report)

LINE 20 – AUTHENTICATION ________________________________ (Report Authentication)
GENERAL INSTRUCTIONS: Use to report current NBC situation and chemical units’ activity. Send on a scheduled time line IAW unit SOPs, such as 0500, 1100, 1700, and 2300 daily. This is considered routine and is a normal report not indicated in NBC 1 through NBC 6 reports. Reference: FM 3-7.

LINE 1 – DATE AND TIME ____________________________ (DTG)

LINE 2 – UNIT ___________________________________________ (Unit Making Report)

LINE 3 – THREATCON ____________________________________ (Threatcon Level of Unit)

LINE 4 – MOPP ___________________________________________ (Minimum MOPP Level of Unit)

LINE 5 – RADIATION STAT _______________________________ (Unit Radiation Status)

LINE 6 – ENEMY ___________________________________________ (Enemy NBC Activity (Use, Nonuse, Any Enemy Chemical Units Detected))

LINE 7 – NBC UNITS _______________________________________ (Status of Chemical Units or Elements (Location, Activity, Recon Status, Readiness Status))

a. No. of Smoke systems auth.____ No. Opnl_____Projected Opnl in 24 Hrs._____ 
b. No. of Decon systems auth____ No. Opnl_____Projected Opnl in 24 Hrs._____ 
c. No. of Recon systems auth____ No. Opnl_____Projected Opnl in 24 Hrs._____ 

LINE 8 – NBC RECON _______________________________________ (Reconnaissance Missions Conducted During Reporting Period)

Missions planned____ DTG of exec._____Location _________ Unit supported____ Mission Purpose___________

LINE 9 – DECON ___________________________________________ (Decon Missions Conducted)

Missions planned____ DTG of exec._____Location _________ Unit supported____ Mission Purpose___________

LINE 10 – SMOKE ___________________________________________ (Smoke Missions Conducted)

Missions planned____ DTG of exec._____Location _________ Unit supported____ Mission Purpose___________

Continued on next page
TITLE: NBC I/ROTA REPORT [NBC1]
REPORT NUMBER: N001 {USMTF # C488}

GENERAL INSTRUCTIONS: Use to provide the observer’s initial report giving basic data on a nuclear attack, biological attack, chemical attack, or releases other than attack (ROTA). This NBC1/ROTA voice message accommodates all NBC1/ROTA reporting. Reference: ATP-45 and FM 3-7.

LINE 1 – DATE AND TIME _______________________________ (DTG)

LINE 2 – UNIT _________________________________________ (Unit Making Report)

LINE 3 – EVENT _________________________________________ (Type of Incident: NUCLEAR, NUC.NAV, BIOLOGICAL, BIO.NAV, CHEMICAL, or CHEM.NAV)

LINE 4 – ALFA_________________________________________ (NBC Strike Serial Number)

LINE 5 – BRAVO________________________________________ (Position of Observer: UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator)

LINE 6 – CHARLIE_______________________________________ (Direction of Attack in Mils or Degrees as Measured Clockwise From Grid, True, or Magnetic North of Attack or ROTA From the Observer)

LINE 7 – DELTA________________________________________ (DTG of Detonation or Beginning of Attack or ROTA)

LINE 8 – ECHO_________________________________________ (End DTG of Attack or ROTA)

LINE 9 – FOXTROT______________________________________ (UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator of Attack and Code Used to Represent if Reported Location of Attack or ROTA is Actual or Estimated)

LINE 10 – GOLF _________________________________________ (Vehicle or Device by Which Weapon Was Delivered or ROTA Was Released)

LINE 11 – HOTEL_______________________________________ (Type of Burst, Biological/ Chemical Agent, and Persistency)

**Continued on next page.
TITLE: NBC 1/ROTA REPORT [NBC1] (CONTINUED)
REPORT NUMBER: N001 {USMTF # C488}

LINE 12 – INDIA __________________________________________ (Number of Munitions or Aircraft)

LINE 13 – JULIET __________________________________________ (Time in Seconds Denoting Flash-to-Bang DTG of Nuclear Attack)

LINE 14 – KILO ____________________________________________ (Terrain and Vegetation Description or Crater Indicator and Width in Feet or Meters)

LINE 15 – LIMA ____________________________________________ (Nuclear Burst Angular Cloud Width Measured at Five Minutes After Detonation Measured in Degrees or Mils)

LINE 16 – MIKE ____________________________________________ (Stabilized Cloud Top or Bottom Height in Feet or Meters or Angular Cloud Top or Bottom Angle in Degrees or Mils Recorded at H+10 Minutes after Detonation)

LINE 17 – PAPA ALFA ROMEO ______________________________ (Coordinate(s) of Hazardous Cloud or Area)

LINE 18 – PAPA BRAVO ROMEO ____________________________ (Downwind Direction of Radioactive Cloud)

LINE 19 – SIERRA__________________________________________ (DTG of the Reading, for Nuclear Reporting, or Initial Detection Time, for Biological/Chemical or ROTA Report)

LINE 20 – YANKEE ________________________________________ (Representative Downwind Direction and Wind Speed or Radial Line Sector)

LINE 21 – ZULU ALFA STABILITY ____________________________ (Air Stability Indicator, Either Detailed or Simplified)

LINE 22 – ZULU ALFA TEMPERATURE________________________ (Surface Air Temperature)

LINE 23 – ZULU ALFA HUMIDITY ____________________________ (Relative Humidity Range)

**Continued on next page.
TITLE: NBC I/ROTA REPORT [NBC1] (CONTINUED)
REPORT NUMBER: N001 {USMTF # C488}

LINE 24 – ZULU ALFA WEATHER ___________________________ (Significant Weather Phenomena)
LINE 25 – ZULU ALFA COVER ______________________________ (Cloud Cover)
LINE 26 – ZULU BRAVO ILLUMINATION___________________ (Illumination Time)
LINE 27 – TIME__________________________________________ (DTG of Observation)
LINE 28 – NARRATIVE ___________________________________ (Free Text for Additional Information Required for Clarification of Report)
LINE 29 – AUTHENTICATION _______________________________ (Report Authentication)
TITLE: NBC 2/ROTA REPORT [NBC2]
REPORT NUMBER: N002 {USMTF # G489}

GENERAL INSTRUCTIONS: Use to disseminate evaluated data of a nuclear attack, biological attack, chemical attack, or releases other than attack (ROTA). This NBC2/ROTA accommodates NBC2/ROTA (NUC, BIO, or CHEM) reporting requirements. Reference: ATP-45 (A) and FM 3-7.

LINE 1 – DATE AND TIME __________________________________ (DTG)
LINE 2 – UNIT _______________________________________________ (Unit Making Report)
LINE 3 – EVENT _____________________________________________ (Type of Incident: NUCLEAR, NUC.NAV, BIOLOGICAL, BIO.NAV, CHEMICAL, or CHEM.NAV)
LINE 4 – ALFA _____________________________________________ (NBC Strike Serial Number)
LINE 5 – DELTA _____________________________________________ (DTG of Detonation or Beginning of Attack or ROTA)
LINE 6 – ECHO ____________________________________________ (Biological or Chemical Events Only: End DTG of Attack or ROTA)
LINE 7 – FOXTROT ________________________________________ (UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator of Attack and Code Used to Represent if Reported Location of Attack or ROTA is Actual or Estimated)
LINE 8 – GOLF ____________________________________________ (Vehicle or Device by Which Weapon Was Delivered or ROTA Was Released)
LINE 9 – HOTEL ___________________________________________ (Type of Burst, Biological/Chemical Agent, and Persistency)
LINE 10 – INDIA __________________________________________ (Number of Munitions or Aircraft)
LINE 11 – KILO ____________________________________________ (Terrain and Vegetation Description or Crater Indicator and Width in Feet or Meters)

**Continued on next page.**
TITLE: NBC 2/ROTA REPORT [NBC2] (CONTINUED)
REPORT NUMBER: N002 {USMTF # G489}

LINE 12 – NOVEMBER__________________________________________ (Estimated Nuclear Yield in
Kilotons Released From Detonation of the Nuclear Weapon)

LINE 13 – YANKEE_____________________________________________ (Radial Line Sector or Representative Downwind Direction and Wind Speed)

LINE 14 – ZULU ALFA STABILITY ___________________________ (Air Stability Indicator, Either Detailed or Simplified)

LINE 15 – ZULU ALFA TEMPERATURE__________________________ (Surface Air Temperature)

LINE 16 – ZULU ALFA HUMIDITY ___________________________ (Relative Humidity Range Indicator)

LINE 17 – ZULU ALFA WEATHER ___________________________ (Significant Weather Phenomena)

LINE 18 – ZULU ALFA COVER ______________________________ (Cloud Cover)

LINE 19 – TIME____________________________________________ (DTG of Observation)

LINE 20 – NARRATIVE ________________________________________ (Free Text for Additional Information Required for Clarification of Report)

LINE 21 – AUTHENTICATION _______________________________ (Report Authentication)
GENERAL INSTRUCTIONS: Use to pass immediate warning of predicted contamination and hazard areas following NBC attacks or releases other than attack (ROTA) hazards. This NBC3/ROTA voice message accommodates all NBC3/ROTA (NUC, BIO, or CHEM) reporting requirements. Reference: ATP-45 and FM 3-7.

LINE 1 – DATE AND TIME _________________________________ (DTG)

LINE 2 – UNIT __________________________________________ (Unit Making Report)

LINE 3 – EVENT ___________________________________________ (Type of Incident: NUCLEAR, NUC.NAV, BIOLOGICAL, BIO.NAV, CHEMICAL, or CHEM.NAV)

LINE 4 – ALFA_________________________________________ (NBC Strike Serial Number)

LINE 5 – DELTA ___________________________________________ (DTG of Detonation or Beginning of Attack or ROTA)

LINE 6 – FOXTROT ________________________________________ (Location of Attack or Event, Area Attacked/Affected)

LINE 7 – GOLF ____________________________________________ (Means of Delivery/ROTA Classification)

LINE 8 – HOTEL ___________________________________________ (Type Burst/Type Agent, Persistency/TM, UNID Number)

LINE 9 – NOVEMBER______________________________________ (Estimated Yield)

LINE 10 – PAPA ALFA______________________________________ (UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator of Predicted Hazardous Cloud or Area)

LINE 11 – PAPA BRAVO______________________________________ (Duration of Hazard in Days or Fraction of Days)

LINE 12 – YANKEE_________________________________________ (Radial Line Sector or the Representative Downwind Direction and Wind Speed)

**Continued on next page.
TITLE: NBC 3/ROTA REPORT [NBC3] (CONTINUED)
REPORT NUMBER: N003 {USMTF # C443}

LINE 13 – ZULU ___________________________________________ (Effective Wind Speed in KM per Hour or Knots, Downwind Distance of Zone 1 in KM or Nautical Miles, and Cloud Radius in KM or Nautical Miles)

LINE 14 – ZULU ALFA STABILITY ___________________________ (Air Stability Indicator, Either Detailed or Simplified)

LINE 15 – ZULU ALFA TEMPERATURE_______________________ (Surface Air Temperature)

LINE 16 – ZULU ALFA HUMIDITY ___________________________ (Relative Humidity Range Indicator)

LINE 17 – ZULU ALFA WEATHER ___________________________ (Significant Weather Phenomena)

LINE 18 – ZULU ALFA COVER ______________________________ (Cloud Cover)

LINE 19 – ZULU BRAVO ____________________________________ (Remarks (CHEM))

LINE 20 – TIME ____________________________________________ (DTG of Observation)

LINE 21 – NARRATIVE _____________________________________ (Free Text for Additional Information Required for Clarification of Report)

LINE 22 – AUTHENTICATION _______________________________ (Report Authentication)
TITLE: NBC 4 REPORT [NBC4]
REPORT NUMBER: N004 {USMTF # C447}

GENERAL INSTRUCTIONS: Use to report NBC monitoring and survey results. This NBC4 voice message accommodates all NBC4 (NUC, BIO, or CHEM) reporting. Reference: FM 3-7.

LINE 1 – DATE AND TIME _______________________________ (DTG)
LINE 2 – UNIT ____________________________________________ (Unit Making Report)
LINE 3 – EVENT ___________________________________________ (Type of Incident: NUCLEAR, NUC.NAV, BIOLOGICAL, BIO.NAV, CHEMICAL, or CHEM.NAV)
LINE 4 – ALFA _____________________________________________ (NBC Strike Serial Number)
LINE 5 – HOTEL ___________________________________________ (Type of Burst, Biological/Chemical Agent, and Persistency)
LINE 6 – KILO _____________________________________________ (Terrain and Vegetation Description or Crater Indicator and Width in Feet or Meters)
LINE 7 – QUEBEC __________________________________________ (UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator of the Reading or Sample and the Categories/Type of Sample)
LINE 8 – ROMEO __________________________________________ (Level of Radiation, Measured in cGy/H, Dose Rate Trend, and Relative or Actual Radiation Decay Rate)
LINE 9 – SIERRA ___________________________________________ (DTG the Contamination Was Detected or DTG of Reading or Sample)
LINE 10 – TIME ____________________________________________ (DTG of Observation)
LINE 11 – NARRATIVE _____________________________________ (Free Text for Additional Information Required for Clarification of Report)
LINE 12 – AUTHENTICATION _______________________________ (Report Authentication)
TITLE: NBC 5 REPORT [NBC5]
REPORT NUMBER: N005 {USMTF # C501}

GENERAL INSTRUCTIONS: Use to pass information on areas of actual nuclear, biological, or chemical contamination. This NBC5 voice message accommodates all NBC5 (NUC, BIO, or CHEM) reporting requirements by selected use of sets. Reference: FM 3-7.

LINE 1 – DATE AND TIME ____________________________ (DTG)

LINE 2 – UNIT ____________________________________________ (Unit Making Report)

LINE 3 – EVENT ___________________________________________ (Type of Incident: NUCLEAR, BIOLOGICAL, or CHEMICAL)

LINE 4 – ALFA _____________________________________________ (NBC Strike Serial Number)

LINE 5 – DELTA ___________________________________________ (DTG of Detonation or Beginning of Attack)

LINE 6 – FOXTROT ________________________________________ (UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator of Attack and Code Used to Represent if Reported Location of Attack is Actual or Estimated)

LINE 7 – HOTEL ___________________________________________ (Type of Burst, Biological/Chemical Agent, and Persistency)

LINE 8 – OSCAR ___________________________________________ (Reference: DTG for Estimated Contours When Not H+1 Hour)

LINE 9 – SIERRA ___________________________________________ (DTG Contamination Was Detected or DTG of Reading)

LINE 10 – TANGO __________________________________________ (H+1 DTG of Reading)

LINE 11 – UNIFORM ________________________________________ (Coordinates of 1,000 cGy/H Contour Line-Red)

LINE 12 – VICTOR __________________________________________ (Coordinates of 300 cGy/H Contour Line-Green)

LINE 13 – WHISKEY _________________________________________ (Coordinates of 100 cGy/H Contour Line-Blue)

**Continued on next page.
TITLE: NBC 5 REPORT [NBC5] (CONTINUED)
REPORT NUMBER: N005 \{USMTF \# C501\}

LINE 14 – XRAY ___________________________________________ (Coordinates of 20 cGy/H Contour Line or Area of Biological Chemical Contamination - Black or Yellow)

LINE 15 – TIME ____________________________________________ (DTG of Observation)

LINE 16 – NARRATIVE _____________________________________ (Free Text for Additional Information Required for Clarification of Report)

LINE 17 – AUTHENTICATION _______________________________ (Report Authentication)
TITLE: NBC 6/ROTA REPORT [NBC6]
REPORT NUMBER: N006 {USMTF # C506}

GENERAL INSTRUCTIONS: Use to pass detailed information on chemical and biological attacks and releases other than attack (ROTA) hazards. This NBC6/ROTA voice message accommodates all NBC6/ROTA (BIO or CHEM) reporting requirements. Reference: ATP-45 (A) and FM 3-7.

LINE 1 – DATE AND TIME _____________________________ (DTG)

LINE 2 – UNIT ______________________________________ (Unit Making Report)

LINE 3 – EVENT _______________________________________ (Type of Incident: BIOLOGICAL or CHEMICAL)

LINE 4 – ALFA ________________________________________ (NBC Strike Serial Number)

LINE 5 – DELTA _______________________________________ (DTG of Detonation or Beginning of Attack or Release)

LINE 6 – ECHO _______________________________________ (Day-Time Attack or Release Ended)

LINE 7 – FOXTROT ___________________________________ (UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator of Attack and Code Used to Represent if Reported Location of Attack or ROTA Release is Actual or Estimated)

LINE 8 – GOLF ______________________________________ (Means by Which Chemical/Biological Agent Weapon or ROTA Was Delivered or Released)

LINE 9 – HOTEL ______________________________________ (Type of Burst, Biological/Chemical Agent, and Persistency)

LINE 10 – INDIA ______________________________________ (Number of Munitions or Aircraft)

LINE 11 – KILO _______________________________________ (Description of Terrain and Vegetation)

LINE 12 – MIKE ________________________________________ (Enemy Action Before and After Attack and Effect on Troops)

**Continued on next page**
TITLE: NBC 6/ROTA REPORT [NBC6] (CONTINUED)
REPORT NUMBER: N006 {USMTF # C506}

LINE 13 – QUEBEC _________________________________ (Location and Type of Sample)
LINE 14 – SIERRA _________________________________ (DTG Contamination Detected)
LINE 15 – TANGO _________________________________ (DTG of Latest Survey)
LINE 16 – XRAY _________________________________ (Area of Actual Contamination)
LINE 17 – YANKEE _______________________________ (Downwind Direction and Wind Speed)
LINE 18 – ZULU ALFA ___________________________ (Actual Weather Conditions)
LINE 19 – TIME _________________________________ (DTG of Observation)
LINE 20 – NARRATIVE ____________________________ (Free Text for Additional Information Required for Clarification of Report)
LINE 20L1 POSITION OF OBSERVER _______________ (UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator of Observer)
LINE 20A1 HELICOPTER TO AEROSOL RANGE __________ (Range in Meters From Helicopter to Aerosol)
LINE 20A2 AEROSOL WIDTH _________________________ (Aerosol Width)
LINE 20A3 AEROSOL HEIGHT ________________________ (Aerosol Height (optional))
LINE 20A4 AEROSOL HEIGHT ABOVE GROUND __________ (Aerosol Height in Meters AGL)
LINE 20Z DETECTION TIME _________________________ (DTG the Aerosol Was Detected)
LINE 20E1 HELICOPTER ALTITUDE ___________________ (Helicopter Altitude)
LINE 20E2 HELICOPTER HEADING ____________________ (Helicopter Heading in Degrees)

**Continued on next page**
TITLE: NBC 6/ROTA REPORT [NBC6] (CONTINUED)
REPORT NUMBER: N006 {USMTF # C506}

LINE 20E3 HELICOPTER CRAB ________________________________ (Helicopter Crab Angle)
LINE 20R1 TYPE OF REPORT ________________________________ (L, F, LC)
LINE 20R2 FLIGHT TIME REMAINING________________________ (Flight Time Remaining)
LINE 20R3 GROUND TRACK ________________________________ (Ground Track)
LINE 21 – AUTHENTICATION ________________________________ (Report Authentication)

**Add LINES 20 L1-R3 for the Long Range Biological Standoff Detection System (LRBSDS).**
TITLE: OPERATION ORDER [ORDER]
REPORT NUMBER: O001

GENERAL INSTRUCTIONS: Use to transmit the standard five-paragraph operation order (OPORD) and operation plan (OPLAN) that provide plans, instructions, and directives to subordinate and supporting military organizations. Reference: FM 101-5, FM 71-100, and FM 100-15.

LINE 1 – DATE AND TIME ________________________________ (DTG)
LINE 2 – UNIT _________________________________________ (Unit Making Report)
LINE 3 – OPERATION (PLAN) ORDER ________________________ (Order Number)
LINE 4 – REFERENCES ____________________________________ (References)
LINE 5 – TIME ZONE _____________________________________ (TZ Used in OPORD/OPLAN)
LINE 6 – TASK ORGANIZATION _____________________________ (TO of Unit)
LINE 7 – SITUATION
  a. ENEMY______________________________________ (Enemy Forces)
  b. FRIENDLY ___________________________________ (Friendly Forces)
  c. ATTACH/DET ________________________________ (Attachments/Detachments)
  d. ASSUMPTIONS (OPLAN ONLY) ________________ (OPLAN only)
LINE 8 – MISSION _________________________________________
LINE 9 – EXECUTION INTENT________________________________
  a. CONCEPT_______________________________________ (Concept of Operation)
    (1) MANEUVER___________________________________ (Maneuver Units)
    (2) FIRES ______________________________________ (Fire Support Elements)
    (3) RECON AND SURVEILLANCE__________ (R&S PLAN)
    (4) INTELLIGENCE____________________________ (MI Elements)
    (5) ENGINEER ________________________________ (Engineer Elements)
    (6) AIR DEFENSE ____________________________ (ADA Elements)
    (7) INFORMATION OPERATIONS _____________ (Information Ops Elements)

**Continued on next page.**
b. TASKS TO MANEUVER UNITS __________________ (Tasks to Maneuver Units)
   ________________________________________
   ________________________________________

c. TASKS TO COMBAT SUPPORT UNITS___________ (Tasks to CS Units)
   (1) INTELLIGENCE___________________________ (Tasks to MI Units)
   (2) ENGINEER______________________________ (Tasks to Engineer)
   (3) FIRES _________________________________ (Tasks to Fire Support Elements)
   (4) AIR DEFENSE __________________________ (Tasks to ADA Elements)
   (5) SIGNAL_______________________________ (Tasks to Signal Elements)
   (6) NBC _________________________________ (Tasks to NBC Elements)
   (7) PROVOST MARSHAL_____________________ (Tasks to PM Elements)
   (8) PSYOP_______________________________ (Tasks to Special Ops Elements)
   (9) CIVIL MILITARY_______________________ (Tasks to CA Elements)
   (10) AS REQUIRED__________________________

d. COORDINATING INSTRUCTIONS _____________ (Coordinating Instructions)
   (1) TIME ORDER/PLAN IN EFFECT___________ (DTG of Effective Time of Plan/Order)
   (2) CCIR _______________________________ (CDR’s CCIR by Priority and Phase)
   (3) RISK MGMT___________________________ (Risk Reduction Control Measures)
   (4) ROE _________________________________ (Rules of Engagement)
   (5) EPA _________________________________ (Environmental Concerns)
   (6) FORCE PROTECTION____________________ (Force Protection Measures)
   (7) AS REQUIRED__________________________ (When Needed)

**Continued on next page.**
LINE 10 – SERVICE AND SUPPORT

a. SUPPORT CONCEPT____________________________ (Concept of Support)
b. MATERIAL AND SERVICES ______________________
c. MEDICAL EVAC AND HOSPITALIZATION ________
d. PERSONNEL ________________________________
e. CIVIL MILITARY_______________________________
f. AS REQUIRED _______________________________

LINE 11 – COMMAND AND SIGNAL

a. COMMAND ________________________________ (Command)
b. SIGNAL____________________________________ (Signal)

LINE 12 – ACKNOWLEDGE _______________________________ (Mandatory)

LINE 13 – CDR NAME/RANK ________________________________ (Commander’s Name and Rank)

LINE 14 – ANNEX A____________________________________ (TO Instructions and Format)

LINE 15 – ANNEX B____________________________________ (INTEL Instructions and Format)

LINE 16 – ANNEX C____________________________________ (OPS Overlay Instructions and Format)

LINE 17 – ANNEX D____________________________________ (Fire Support Instructions and Format)

LINE 18 – ANNEX E____________________________________ (ROE Instructions and Format)

LINE 19 – ANNEX F____________________________________ (Engineer Instructions and Format)

LINE 20 – ANNEX G____________________________________ (ADA Instructions and Format)

LINE 21 – ANNEX H____________________________________ (Signal Instructions and Format)

LINE 22 – ANNEX I____________________________________ (CSS Instructions and Format)

**Continued on next page.
TITLE: OPERATION ORDER [ORDER] (CONTINUED)
REPORT NUMBER: O001

LINE 23 – ANNEX J _______________________________ (NBC Ops Instructions and Format)

LINE 24 – ANNEX K _______________________________ (PM Instructions and Format)

LINE 25 – ANNEX L _______________________________ (R&S Instructions and Format)

LINE 26 – ANNEX M _______________________________ (Deep Ops Instructions and Format)

LINE 27 – ANNEX N _______________________________ (Rear Ops Instructions and Format)

LINE 28 – ANNEX O _______________________________ (A2C2 Instructions and Format)

LINE 29 – ANNEX P _______________________________ (CCW Instructions and Format)

LINE 30 – ANNEX Q _______________________________ (OPSEC Instructions and Format)

LINE 31 – ANNEX R _______________________________ (PSYOP Instructions and Format)

LINE 32 – ANNEX S _______________________________ (Deception Instructions and Format)

LINE 33 – ANNEX T _______________________________ (EW Instructions and Format)

LINE 34 – ANNEX U _______________________________ (Civil-Military OPS Instructions and Format)

LINE 35 – ANNEX V _______________________________ (PA Instructions and Format)

LINE 36 – NARRATIVE _______________________________ (Free Text for Additional Information Required for Clarification of Report)

LINE 37 – AUTHENTICATION _________________________ (Report Authentication)
TITLE: OPERATION REPORT [OPREP]
REPORT NUMBER: O005

GENERAL INSTRUCTIONS: Use to report operational situations, problems, recommended or intended courses of action, and other items not reported elsewhere. Send as determined by higher headquarters or by necessity of subordinate headquarters. Reference: FM 100-15, FM 71-100, and FM 101-5.

LINE 1 – DATE AND TIME ________________________________ (DTG)

LINE 2 – UNIT ________________________________ (Unit Making Report)

LINE 3 – COMMAND POST ________________________________ (CP/LZ Locations for TAC CP, Main CP, and Rear CP)

LINE 4 – FLOT ________________________________ (FLOT at Least Three Grids)

LINE 5 – FEBA ________________________________ (FEBA at Least Three Grids)

LINE 6 – OPSUM ________________________________ (Brief Summary of Reporting Unit’s Activity and Task Organization)

LINE 7 – ENEMY ________________________________ (Enemy Activity in Reporting Unit’s Area of Interest and Operation)

LINE 8 – UNIT STAT ________________________________ (Unit Statistics)

PERSONNEL ________________________________

EQUIPMENT ________________________________

CLASS OF SUPPLY ________________________________

LINE 9 – EVALUATION ________________________________ (Reporting Commander’s Overall Evaluation to Include Mission, Commander’s Overall Evaluation of Reporting Unit’s Ability to Accomplish its Mission.)

LINE 10 – NARRATIVE ________________________________ (Free Text for Additional Information Required for Clarification of Report)

LINE 11 – AUTHENTICATION ________________________________ (Report Authentication)
TITLE: OPERATIONS PLAN CHANGE [PLANORDCHG]
REPORT NUMBER: O010 {USMTF # E400}

GENERAL INSTRUCTIONS: Use to update or change existing operations plans. (Note: Use FRAGO to change OPORD.) Reference: FM 100-15, FM 71-100, and FM 101-5.

LINE 1 – DATE AND TIME ________________________________ (DTG)
LINE 2 – UNIT _________________________________________ (Unit Making Report)
LINE 3 – ORIGINATOR __________________________________ (Military Designation of Responsible Authority of the Operations Plan)
LINE 4 – NUMBER ______________________________________ (Operations Plan Number)
LINE 5 – ANNEX ________________________________________ (Annex Number Assigned to the Specific Operation Plan Being Changed)
LINE 6 – APPENDIX _____________________________________ (Appendix Number Assigned to the Specific Operation Plan Being Changed)
LINE 7 – TAB __________________________________________ (Tab Number Assigned to the Specific Operation Plan Being Changed)
LINE 8 – ENCLOSURE ____________________________________ (Enclosure Number Assigned to the Specific Operation Plan Being Changed)
LINE 9 – PAGE _________________________________________ (Page Number Assigned to the Specific Operation Plan Being Changed)
LINE 10 – PARAGRAPH _________________________________ (Paragraph Number Assigned to the Specific Operation Plan Being Changed)
LINE 11 – LINE ________________________________________ (Line Number Assigned to the Specific Operation Plan Being Changed)
LINE 12 – NARRATIVE ___________________________________ (Free Text for Additional Information Required for Clarification of Report)
LINE 13 – AUTHENTICATION ______________________________ (Report Authentication)
TITLE: OPERATIONS SUMMARY [OPOSUM]
REPORT NUMBER: O015 {USMTF # G423}

GENERAL INSTRUCTIONS: Use to provide a commander’s summary of significant operations to the next higher commander. Reference: FM 100-15, FM 71-100, and FM 101-5.

LINE 1 – DATE AND TIME _________________________________ (DTG)
LINE 2 – UNIT _____________________________________________ (Unit Making Report)
LINE 3 – AIR ______________________________ (Number of Sorties Tasked, Flown, Successful, Kills Claimed)
LINE 4 – GROUND _________________________________________ (Ground Operations Summarized)
LINE 5 – MARITIME________________________________________ (Maritime Operations Summarized)
LINE 6 – NARRATIVE ______________________________________ (Free Text for Additional Information Required for Clarification of Report)
LINE 7 – AUTHENTICATION ________________________________ (Report Authentication)
GENERAL INSTRUCTIONS: Use to report information and combat actions obtained on mounted and

LINE 1 – DATE AND TIME _________________________________ (DTG)
LINE 2 – UNIT ___________________________________________ (Unit Making Report)
LINE 3 – DPT & RTN DTG___________________________________ (Patrol Departure and Return
DTG)
LINE 4 – ROUTE ___________________________________________ (Patrol Route (if Applicable))
LINE 5 – CHECK POINTS ___________________________________ (Check Points Patrol Route Will
Follow)
LINE 6 – RESULTS _________________________________________ (Results (if Specified in Mission
Task and Purpose))
LINE 7 – CONDITION OF PATROL ___________________________ (Status Report of Patrol,
Friendly Losses)
LINE 8 – SALUTE __________________________________________ (Enemy Encountered,
SALUTE)
LINE 9 – BDA ENEMY ________________________________________ (Battle Damage Assessment
Enemy)
LINE 10 – ROUTE RECON RPT_______________________________ (Description of Terrain, Route
Recon Report, Correction to Maps (if Applicable))
LINE 11 – NARRATIVE ______________________________________ (Free Text for Additional
Information Required for Clarification of Report)
LINE 12 – AUTHENTICATION _________________________________ (Report Authentication)
GENERAL INSTRUCTIONS: Use to report the status of the unit’s personnel. Reference: FM 12-6.

LINE 1 – DATE AND TIME ________________________________ (DTG)

LINE 2 – UNIT _____________________________________________ (Unit Making Report)

LINE 3 – FROM ____________________________________________ (DTG for the Beginning of Period Applying to Personnel Information)

LINE 4 – TO _______________________________________________ (DTG for the End of Report Period)

LINE 5 – UNIT _____________________________________________ (Designation of the Unit for Which the Personnel Status Information is Being Submitted)

LINE 6 – AUTHORIZED _____________________________________ (Number of Personnel Authorized by Personnel Classification)

LINE 7 – ASSIGNED ________________________________________ (Number of Personnel Assigned by Personnel Classification)

LINE 8 – ON HAND_________________________________________ (Number of Personnel on Hand by Personnel Classification)

LINE 9 – GAINS____________________________________________ (Number of Personnel Gains by Personnel Classification)

LINE 10 – REPLACEMENTS _________________________________ (Number of Personnel Gained That Are Replacements by Personnel Classification)

LINE 11 – RETURNED TO DUTY ______________________________ (Number of Personnel Gained That Have Been Returned to Duty Through Medical Channels by Personnel Classification)

LINE 12 – KILLED__________________________________________ (Number of KIA by Personnel Classification)

LINE 13 – WOUNDED ________________________________________ (Number of WIA by Personnel Classification)

**Continued on next page.
**TITLE: PERSONNEL STATUS REPORT [PERSTAT] (CONTINUED)**

**REPORT NUMBER: P005 [USMTF # G880]**

<table>
<thead>
<tr>
<th>LINE</th>
<th>DESCRIPTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>14</td>
<td>NONBATTLE LOSS (Number of Disease Nonbattle Injury Loss by Personnel Classification)</td>
</tr>
<tr>
<td>15</td>
<td>MISSING (Number of MIA by Personnel Classification)</td>
</tr>
<tr>
<td>16</td>
<td>DESERTERS (Number of Deserters by Personnel Classification)</td>
</tr>
<tr>
<td>17</td>
<td>AWOL (Number Absent Without Leave by Personnel Classification)</td>
</tr>
<tr>
<td>18</td>
<td>CAPTURED (Number of Enemy Personnel Captured During the Reporting Period)</td>
</tr>
</tbody>
</table>

**Repeat lines 5 through 18 to indicate the personnel summary of additional units. Assign sequential line numbers to succeeding iterations; for example, first iteration 5 through 18; second iteration 5a through 18a; third iteration 5b through 18b, and so on.**

<table>
<thead>
<tr>
<th>LINE</th>
<th>DESCRIPTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>19</td>
<td>NARRATIVE (Free Text for Additional Information Required for Clarification of Report)</td>
</tr>
<tr>
<td>20</td>
<td>AUTHENTICATION (Report Authentication)</td>
</tr>
</tbody>
</table>
TITLE: PRELIMINARY TECHNICAL REPORT [PRETECHREP]
REPORT NUMBER: P010 {USMTF # F105}

GENERAL INSTRUCTIONS: Use to disseminate initial technical information on captured or acquired foreign material and ordnance. Reference: FM 34-54 and FM 34-60.

| LINE 1 – DATE AND TIME _________________________________ (DTG) |
| LINE 2 – UNIT _______________________________ (Unit Making Report) |
| LINE 3 – MATERIEL CATEGORY ____________________ (Category of Materiel the Acquired Items Belong to) |
| LINE 4 – UNIT ID _______________________________ (Identification of the Unit Acquiring the Materiel) |
| LINE 5 – DAY TIME ACQUIRED ________________________ (DTG When the Materiel Was Acquired) |
| LINE 6 – LOCATION ACQUIRED ________________________ (UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator Where Acquired) |
| LINE 7 – CIRCUMSTANCES _________________________ (Brief Description of the Circumstances Surrounding Acquisition of the Materiel) |
| LINE 8 – CONTACT NAME _________________________ (Name of Reporting Unit POC) |
| LINE 9 – RANK OR RATE ___________________________ (Rank or Rate/Rating of Reporting Unit POC) |
| LINE 10 – PRIMARY PHONE ________________________ (Primary Telephone Number of Reporting Unit POC) |
| LINE 11 – PRIMARY FREQUENCY ____________________ (Primary Radio Frequency of Reporting Unit Using MHz, Frequency Designator, or Frequency) |
| LINE 12 – POC LOCATION ________________________ (POC Location Using UTM or Six-Digit Grid Coordinate with MGRS Grid Zone Designator) |
| LINE 13 – SECONDARY PHONE ______________________ (Secondary Telephone Number of Reporting Unit POC) |

**Continued on next page.**
TITLE: PRELIMINARY TECHNICAL REPORT [PRETECHREP] (CONTINUED)
REPORT NUMBER: P010 {USMTF # F105}

LINE 14 – SECONDARY FREQUENCY ________________________ (Secondary Radio Frequency of Reporting Unit Using MHz, Frequency Designator, or Frequency)

LINE 15 – OTHER INFORMATION____________________________ (Other Additional Information Concerning Unexploded Ordnance Such as Tentative Render Safe Procedures, Other Descriptions)

**Repeat lines 3 through 15 to report multiple materiel acquisitions. Assign sequential line numbers to succeeding iterations; for example, first iteration 3 through 15; second iteration 3a through 15a; third iteration 3b through 15b; and so on.

LINE 16 – NARRATIVE _____________________________________ (Free Text for Additional Information Required for Clarification of Report)

LINE 17 – AUTHENTICATION _______________________________ (Report Authentication)
| LINE 1 – DATE AND TIME | _________________________________ (DTG) |
| LINE 2 – UNIT | _________________________________ (Unit Making Report) |
| LINE 3 – ENVIRONMENT | _________________________________ (Describe the General PSYOP Environment, to Include Friendly PSYOP Effectiveness, and Hostile PSYOP Assets or Products Encountered) |
| LINE 4 – ACTIVITIES | _________________________________ (Enter the Disposition of PSYOP Forces and Operations) |
| LINE 5 – PROJECTED ACTIVITIES | _________________________________ (Enter the Projected Disposition of Forces Next 24 Hours and Projected Operations) |
| LINE 6 – LOGISTICS | _________________________________ (Enter the Logistics Situation and Requirements) |
| LINE 7 – EVALUATION | _________________________________ (Enter the Commander’s Evaluation) |
| LINE 8 – NARRATIVE | _________________________________ (Free Text for Additional Information Required for Clarification of Report) |
| LINE 9 – AUTHENTICATION | _________________________________ (Report Authentication) |
TITLE: PUBLIC AFFAIRS OPERATION REPORT [PUBAFFOPSREP]
REPORT NUMBER: P020

GENERAL INSTRUCTIONS: Use to convey status of PA operations by PAO. Reference: FM 46-1.

LINE 1 – DATE AND TIME _______________________________ (DTG)

LINE 2 – UNIT _________________________________________ (Unit Making Report)

LINE 3 – SUMMARY ______________________________________ (Summary of PAO Activities)
   a. Newspaper Production/Distribution Schedule
   b. Number and Type of Media Escorted by Public Affairs
   c. Personnel in the last 24 hours
   d. Radio Broadcast Schedule
   e. Radio Broadcast Wattage

LINE 4 – ASSESSMENT ___________________________________ (PAO Assessment)
   a. Field Newspaper Produced on Schedule (YES or NO)
   b. Number of MOS-Qualified Journalist Authorized (NOH)
   c. Number of Digital Cameras (Still) Authorized (NOH – OR)
   d. Number of Military Journalists in Sector
   e. Number of Video Cameras in Sector (Number Operational)

LINE 5 – NARRATIVE ____________________________________ (Free Text for Additional Information Required for Clarification of Report)

LINE 6 – AUTHENTICATION _______________________________ (Report Authentication)
TITLE: RADAR STATUS REPORT (RADSTAT)
REPORT NUMBER: R001

GENERAL INSTRUCTIONS: Use to report radar’s unit section number, type, location, and azimuth of search in the counterfire headquarters. If the radar is damaged, destroyed, or in maintenance, add that information in LINE 7 (Narrative). Reference: FM 6-20-10 and FM 6-121.

LINE 1 – DATE AND TIME ____________________________ (DTG)
LINE 2 – UNIT ____________________________ (Unit Making Report)
LINE 3 – SECTION ____________________________ (Section)
LINE 4 – RADAR TYPE ____________________________ (Type Radar (Q36, Q37))
LINE 5 – RADAR LOCATION ____________________________ (Radar Grid)
LINE 6 – AZ ____________________________ (Azimuth of Search)
LINE 7 – NARRATIVE ____________________________ (Free Text for Additional Information Required for Clarification of Report)
LINE 8 – AUTHENTICATION ____________________________ (Report Authentication)
TITLE: REAR AREA PROTECTION UNIT STATUS [RAPSTAT]
REPORT NUMBER: R005 {USMTF # B930}


LINE 1 – DATE AND TIME ________________________________ (DTG)

LINE 2 – UNIT _____________________________________________________________________ (Unit Making Report)

LINE 3 – UNITS AND LOCATION ________________________________ (Units That Are Available for RAP Missions and Their UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator)

LINE 4 – PERSONNEL ____________________________________________________________________ (Personnel Available for RAP Missions by Personnel Class and Unit)

LINE 5 – EQUIPMENT _____________________________________________________________________ (Quantity and Type of Equipment and Weapons by Unit Available for RAP Missions)

LINE 6 – EMPLOYMENT LIMITATIONS ____________________________________ (Employment Limitations of the Reporting Unit)

LINE 7 – NARRATIVE ___________________________________________ (Free Text for Additional Information Required for Clarification of Report)

LINE 8 – AUTHENTICATION ___________________________________________________________________ (Report Authentication)

LINE 1 – DATE AND TIME ___________________________ (DTG)
LINE 2 – UNIT ____________________________________ (Unit Making Report)
LINE 3 – SECURITY ACTIVITY _________________________ (Type Security Activity That Will Occur)
LINE 4 – SECURITY UNITS ___________________________ (Number and Type Units That Will be Involved)
LINE 5 – FROM _________________________________ (Estimated DTG That Security Activity Will Start)
LINE 6 – TO ____________________________________ (Estimated DTG That Security Activity Will End)
LINE 7 – LOCATION ______________________________ (UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator Where Security Activity Will be Conducted)
LINE 8 – INITIAL POINT __________________________ (Initial or Start Point of the Location UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator)
LINE 9 – TRACE PLOT ____________________________ (Trace Plot Defined by a Series of Points in Required Sequence Using UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator)
LINE 10 – CALL SIGN ____________________________ (Call Sign of Unit Coordinating the Security Activity)
LINE 11 – PRIMARY _______________________________ (Primary Radio Frequency of Unit Coordinating the Security Activity)

**Continued on next page.
TITLE: REAR AREA SECURITY ACTIVITIES [RASACT] (CONTINUED)
REPORT NUMBER: R010 {USMTF # D920}

LINE 12 – SECONDARY _____________________________________ (Secondary Radio Frequency of Unit Coordinating the Security Activity)

LINE 13 – NARRATIVE _____________________________________ (Free Text for Additional Information Required for Clarification of Report)

**Repeat lines 3 through 13 to identify multiple requests for security assistance. Assign sequential line numbers to succeeding iterations; for example, first iteration 3 through 13; second iteration 3a through 13a; third iteration 3b through 13b; and so on.

LINE 14 – AUTHENTICATION _______________________________ (Report Authentication)
TITLE: REAR AREA SECURITY REQUEST [RASREQ]
REPORT NUMBER: R015 {USMTF # D004}

GENERAL INSTRUCTIONS: Use to request rear area security assistance. Reference: FM 100-15, FM 71-100, and FM 19-1.

LINE 1 – DATE AND TIME ____________________________ (DTG)

LINE 2 – UNIT ____________________________ (Unit Making Report)

LINE 3 – REQUESTER ____________________________ (Identifier of Unit/Agency Requesting Security Assistance)

LINE 4 – SECURITY ACTIVITY ____________________________ (Security Activity Being Requested)

LINE 5 – UNITS ____________________________ (Number and Type Units Required to Conduct the Mission; if Unknown, State UNKNOWN)

LINE 6 – DATE AND TIME ____________________________ (Date and Time Assistance is Required)

LINE 7 – DURATION ____________________________ (Estimated Duration Time of the Mission in Hours)

LINE 8 – LOCATION ____________________________ (UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator Where Security Assistance Mission Will be Conducted)

LINE 9 – INITIAL POINT ____________________________ (Initial or Start Point Location Using UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator)

LINE 10 – TRACE PLOT ____________________________ (Trace Plot Defined by a Series of Points in Sequence UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator)

LINE 11 – CALL SIGN ____________________________ (Call Sign of Unit Requesting the Security Activity)

LINE 12 – PRIMARY ____________________________ (Primary Radio Frequency of Unit Requesting the Security Activity)

**Continued on next page.**
TITLE: REAR AREA SECURITY REQUEST [RASREQ] (CONTINUED)
REPORT NUMBER: R015 {USMTF # D400}

LINE 13 – SECONDARY ________________________________ (Secondary Radio Frequency of Unit Requesting the Security Activity)

LINE 14 – NARRATIVE ________________________________ (Free Text for Additional Information Required for Clarification of Report)

**Repeat lines 3 through 14 to identify multiple requests for security assistance. Assign sequential line numbers to succeeding iterations; for example, first iteration 3 through 14; second iteration 3a through 14a; third iteration, 3b through 14b; and so on.

LINE 15 – AUTHENTICATION ____________________________ (Report Authentication)
GENERAL INSTRUCTIONS: Use to provide an abbreviated imagery interpretation report in a tactical situation.

LINE 1 – DATE AND TIME _______________________________ (DTG)
LINE 2 – UNIT ________________________________________ (Unit Making Report)
LINE 3 – SERIAL ________________________________________ (Originator's Report Serial Number)
LINE 4 – REQUEST _____________________________________ (Requestor Identity and Serial Number)
LINE 5 – PROJECT ______________________________________ (Project Identifier Code)
LINE 6 – MISSION ________________________________________ (Mission Number)
LINE 7 – DATE _________________________________________ (Mission Date, DTG)
LINE 8 – ITEM _________________________________________ (Item Number)
LINE 9 – NAME _________________________________________ (Target Name or Description)
LINE 10 – NUMBER ______________________________________ (BE Number)
LINE 11 – LOCATION____________________________________ (UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator of Sighting)
LINE 12 – TIME _________________________________________ (DTG of Sighting)
LINE 13 – STATUS ______________________________________ (Status of Activity/Target)
LINE 14 – COUNT ________________________________________ (Count of OB Items)
LINE 15 – TYPE _________________________________________ (Type of OB Item)
LINE 16 – FURTHER ______________________________________ (Follow-Up Report: Yes or No)
LINE 17 – WEATHER _____________________________________ (Weather Conditions Over Target)

**Continued on next page.**
TITLE: RECONNAISSANCE EXPLOITATION REPORT [RECCEXREP] (CONTINUED)
REPORT NUMBER: R020 {USMTF # C101}

LINE 18 – IMAGERY CONFIRMS _____________________________ (Imagery Confirmation of the Pilot Report/Debrief)

LINE 19 – SENSOR _________________________________________ (Type of Sensor Used)

LINE 20 – COVERAGE ______________________________________ (Percent of Target Covered. If less than 100 percent, explain why)

LINE 21 – NARRATIVE _____________________________________ (Free Text for Additional Information Required for Clarification of Report)

LINE 22 – AUTHENTICATION _______________________________ (Report Authentication)
TITLE: RECONNAISSANCE NICKNAME REPORT [RECON 1]
REPORT NUMBER: R025 {USMTF # E631}

GENERAL INSTRUCTIONS: Use to report additions, changes, or deletions of operation order numbers and associated nicknames for reconnaissance. Reference: FM 34-2-1 and FM 101-5.

LINE 1 – DATE AND TIME ________________________________ (DTG)
LINE 2 – UNIT ________________________________ (Unit Making Report)
LINE 3 – TRANSACTION ________________________________ (ADD, CHANGE, or DELETE)
LINE 4 – OPSORD ________________________________ (Operations Order Identification Code)
LINE 5 – NEW NICKNAME ________________________________ (Name of Newly Created or Replacement Nickname)
LINE 6 – OLD NICKNAME ________________________________ (Nickname Being Replaced or Deleted)
LINE 7 – EFFECTIVE ________________________________ (DTG Transaction Becomes Effective)
LINE 8 – AIRCRAFT TYPE ________________________________ (Type of Aircraft)
LINE 9 – PURPOSE ________________________________ (IMINT, SIGINT, COMINT, or MASINT)

**Repeat lines 3 through 9 to identify multiple reconnaissance transactions. Assign sequential line numbers to succeeding iterations; for example, first iteration 3 through 9; second iteration 3a through 9a; third iteration 3b through 9b; and so on.

LINE 10 – NARRATIVE ________________________________ (Free Text for Additional Information Required for Clarification of Report)
LINE 11 – AUTHENTICATION ________________________________ (Report Authentication)
GENERAL INSTRUCTIONS: Use (1) to submit proposed reconnaissance tracks for mission approval and (2) to modify or delete existing active reconnaissance tracks. Reference: FM 34-2-1 and FM 101-5.

LINE 1 – DATE AND TIME ____________________________ (DTG)
LINE 2 – UNIT ____________________________________ (Unit Making Report)
LINE 3 – TRANSACTION ____________________________ (REQUEST, CHANGE, or DELETE)
LINE 4 – NICKNAME ________________________________ (Mission Nickname)
LINE 5 – TRACK ________________________________ (Track Designator That Uniquely Identifies the Reconnaissance Track)
LINE 6 – DATE ________________________________ (DTG That the Reconnaissance Track is Submitted for JS Approval)
LINE 7 – OP AREA ________________________________ (Reconnaissance Operating Area)
LINE 8 – ASSESSMENT ________________________________ (Mission Assessment Code)
LINE 9 – GROUP ________________________________ (Track Approval Authority)
LINE 10 – TRACK EVENTS FOLLOW _________________________ (Terrain Feature or Operational Graphic the Track Follows)
LINE 11 – SEQUENCE ________________________________ (Sequence Point or Event)
LINE 12 – EVENT ________________________________ (Event Code)
LINE 13 – LOCATION ________________________________ (UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator)
LINE 14 – ALTITUDE ________________________________ (High- and Low-Flight Level Altitude Range)
LINE 15 – CLOSEST POINT ________________________________ (Closest Point of Approach in Whole Nautical Miles if Event Code is NE)

** Continued on next page. 
TITLE: RECONNAISSANCE TRACK REPORT [RECON 2] (CONTINUED)
REPORT NUMBER: R030 {USMTF # E632}

LINE 16 – COUNTRY ______________________________________ (Country Code if Event Code is NE, TO, or LN.XX, if Unknown)

LINE 17 – CONTROL POINT ________________________________ (No-Wind Time to Mission Control Point if Event Code is CP)

**Repeat lines 10 through 17 to report multiple reconnaissance track orbits. Assign sequential line numbers to succeeding iterations; for example, first iteration 10 through 17; second iteration 10a through 17a; third iteration 10b through 17b; and so on.

LINE 18 – ORBIT INFO FOLLOWS__________________________ (Alerts receiver that the next four lines contain Orbit Information. When sending more than one track, state the number of the track being sent.)

EXAMPLE: ORBIT INFO FOLLOWS, TRACK ONE.

LINE 19 – ORDER ________________________________________ (Order Number of Each Set of Events Starting With 1 at the First Enter Orbit Point)

LINE 20 – FROM _________________________________________ (First Sequence of Events Code at the Enter Orbit Point)

LINE 21 – TO ___________________________________________ (Last Sequence of Events Code at the Exit Orbit Point)

LINE 22 – ORBITS______________________________________ (Number of Orbits That an Aircraft Makes; 1 Indicates No Orbits)

**Repeat lines 18 through 22 to report multiple reconnaissance track orbits. Assign sequential line numbers to succeeding iterations; for example, first iteration 18 through 22; second iteration 18a through 22a; third iteration 18b through 22b; and so on.

LINE 23 – AREA TIME ____________________________________ (Total Time in Hours and Tenths That a Vehicle Spends Collecting Against Objectives)

LINE 24 – NARRATIVE ___________________________________ (Free Text for Additional Information Required for Clarification of Report)

LINE 25 – AUTHENTICATION ______________________________ (Report Authentication)
# Title: Reconnaissance Scheduling Report [Recon 3]

**Report Number:** R035 {USMTF # E633}

**General Instructions:**
- Use (1) to provide selected and specific data on proposed reconnaissance mission schedules,
- (2) to make changes to approved schedules, and
- (3) to inform of CINC/unit intention to fly specific reconnaissance missions.

Reference: FM 34-2-1 and FM 101-5.

**Line 1 – Date and Time** _________________________________ (DTG)

**Line 2 – Unit** _________________________________________ (Unit Making Report)

**Line 3 – Transaction** _________________________________ (SCHEDULE, ADD, CANCEL, CHANGE, DELAY, INDEFINITE DELAY, or RESCHEDULE)

**Line 4 – Period** ______________________________________ (Mission Schedule Month and Year)

**Line 5 – Reason** ______________________________________ (Reason for Mission)

**Line 6 – Mission Name** ________________________________ (Mission Nickname)

**Line 7 - Mission Data Follows** __________________________ (Alerts receiver that the next eleven lines contain Mission Data. When sending data for more than one mission, state the number of the mission being sent.)

**Example:** MISSION DATA Follows; FIRST MISSION

**Line 8 – Mission** _________________________________ (Mission Number)

**Line 9 – Track** _________________________________ (Mission Track Number)

**Line 10 – Number Type** ________________________________ (Count and Type of Aircraft)

**Line 11 – Purpose** ________________________________ (Primary and Secondary Codes)

**Line 12 – Takeoff** ________________________________ (Estimated Departure DTG Zulu)

**Line 13 – Base** ________________________________ (Departure Base ICAO Code)

**Line 14 – Landing** ________________________________ (Estimated Arrival DTG Zulu)

**Line 15 – Base** ________________________________ (Recovery Base ICAO Code)

**Continued on next page.**
TITLE: RECONNAISSANCE SCHEDULING REPORT [RECON 3] (CONTINUED)
REPORT NUMBER: R035 {USMTF # E633}

LINE 16 – ASSESSMENT ________________________________
(Mission Assessment Code)

LINE 17 – CONTINGENCY ______________________________
(C if a Contingency Mission)

LINE 18 – COORDINATED ______________________________
(C and 1 Through 9)

**Repeat lines 7 through 18 to report multiple missions. Assign sequential line numbers to succeeding
iterations; for example, first iteration 7 through 18; second iteration 7a through 18a; third iteration 7b
through 18b; and so on.

LINE 19 – TRACK OPTION DATA FOLLOWS _____________
(Alerts receiver that the next three lines contain Track Option
Data. When sending data for more than one mission, state the
number of the mission being sent.)

EXAMPLE: TRACK OPTION DATA FOLLOWS; FIRST TRACK

LINE 20 – MISSION ________________________________
(Mission Number of Multitrack Mission Being Scheduled)

LINE 21 – OPTIONS ________________________________
(Optional Track Numbers and Mission Assessment Codes)

**Repeat lines 19 through 21 to report multiple multitrack missions. Assign sequential line numbers to succeeding iterations; for example, first iteration 19 through 21; second iteration 19a through 21a; third iteration, 19b through 21b; and so on.

LINE 22 – COORDINATED MISSION DATA FOLLOWS _______
(Alerts receiver that the next three lines contain Coordinated Mission Data. If you are sending data for more than one mission, state the number of the mission being sent.)

EXAMPLE: COORDINATED MISSION DATA FOLLOWS; FIRST MISSION

LINE 23 – MISSION ________________________________
(Mission Number of the Coordinated Mission Being Scheduled)

LINE 24 – WITH ________________________________
(Up to 6 Coordinated Mission Numbers)

**Continued on next page.
**Repeat lines 22 through 24 to report multiple multitrack missions. Assign sequential line numbers to succeeding iterations; for example, first iteration 22 through 24; second iteration 22a through 24a; third iteration 22b through 24b; and so on.

LINE 25 – SPECIAL DATA___________________________________ (Enter data that does not belong in another line.)

LINE 26 – NARRATIVE ________________________________ (Free Text for Additional Information Required for Clarification of Report)

LINE 27 – AUTHENTICATION ______________________________ (Report Authentication)
| LINE 1 – DATE AND TIME _________________________________ (DTG) |
| LINE 2 – UNIT ________________________________________ (Unit Making Report) |
| LINE 3 – TRANSACTION __________________________________ (LAUNCH, RECOVERY, RELAUNCH, or CHANGE) |
| LINE 4 – NICKNAME ___________________________________ (Approved Nickname) |
| LINE 5 – MISSION ______________________________________ (Mission Number) |
| LINE 6 – TRACK _________________________________________ (Track Number) |
| LINE 7 – FORCE _________________________________________ (Count and Type of Aircraft) |
| LINE 8 – ACTUAL DEPARTURE ______________________________ (Actual Departure DTG Zulu) |
| LINE 9 – BASE _________________________________________ (Actual Launch Base ICAO Code or Coordinates) |
| LINE 10 – ESTIMATED ARRIVAL ____________________________ (Estimated Recovery DTG Zulu) |
| LINE 11 – BASE _________________________________________ (Anticipated Recovery UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator) |
| LINE 12 – ACTUAL ARRIVAL _______________________________ (Actual Landing DTG Zulu) |
| LINE 13 – BASE _________________________________________ (Actual Recovery Base Using UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator) |
| LINE 14 – STATUS ______________________________________ (ABORT COMPLETE, ABORT INCOMPLETE, or AS SCHEDULED) |
| LINE 15 – REASON ______________________________________ (Reason for Aborting Mission) |

**Continued on next page.**
**Repeat lines 3 through 15 to report multiple multitrack missions. Assign sequential line numbers to succeeding iterations; for example, first iteration 3 through 15; second iteration 3a through 15a; third iteration 3b through 15b; and so on.

LINE 16 – NARRATIVE _____________________________________ (Free Text for Additional Information Required for Clarification of Report)

LINE 17 – AUTHENTICATION _______________________________ (Report Authentication)
TITLE: REQUEST CONFIRMATION [REQCONF]
REPORT NUMBER: R045 {USMTF # F657}

GENERAL INSTRUCTIONS: Use (1) to inform the requesting command, tasking authority, and tasked units of actions being taken and (2) to provide additional information about the missions. Use for both preplanned and immediate air-tasking cycles. Reference: FM 100-103 and FM 1-100.

LINE 1 – DATE AND TIME ________________________________ (DTG)
LINE 2 – UNIT ________________________________ (Unit Making Report)
LINE 3 – REQUEST ________________________________ (Request Number)
LINE 4 – STATUS ________________________________ (Approved or Disapproved)

**If disapproved, skip to LINE 15.

LINE 5 – MISSION ________________________________ (Mission Number)
LINE 6 – PRIORITY ________________________________ (Priority Assigned)
LINE 7 – TASKED ________________________________ (Unit Providing Sorties)
LINE 8 – TYPE ________________________________ (Mission Type)
LINE 9 – START ________________________________ (DTG or Relative Time Aircraft Due to Arrive at Mission Location or Start Alert)
LINE 10 – STOP ________________________________ (DTG or Relative Time Aircraft Due to Depart at Mission Location or Stop Alert)
LINE 11 – CALL SIGN ________________________________ (Call Sign of the Aircraft Provided)
LINE 12 – NO. TYPE ________________________________ (Number and Type Aircraft Provided)
LINE 13 – WEAPON ________________________________ (Weapon Type)
LINE 14 – NARRATIVE ________________________________ (Free Text for Additional Information Required for Clarification of Report)
LINE 15 – AUTHENTICATION ________________________________ (Report Authentication)
FM 101-5-2

TITLE: REQUEST FOR INFORMATION [RFI]
REPORT NUMBER: R050 {USMTF # F014}

GENERAL INSTRUCTIONS: Use to request information from requesting unit’s command post or other units. Reference: FM 101-5.

LINE 1 – DATE AND TIME ________________________________ (DTG)
LINE 2 – UNIT ________________________________________ (Unit Making Request)
LINE 3 – REQUEST _____________________________________ (Desired Information (Specific Order or Request))
LINE 4 – PRIORITY _____________________________________ (Requestors Priority: ONE, TWO, THREE, or FOUR)
LINE 5 – BY ___________________________________________ (DTG Information Required)
LINE 6 – LTIOV _________________________________________ (DTG of Latest Time of Intelligence/Information Value)
LINE 7 – NARRATIVE ___________________________________ (Free Text for Additional Information Required for Clarification of Report)
LINE 8 – AUTHENTICATION _______________________________ (Report Authentication)
TITLE: RESPONSE TO REQUEST FOR INFORMATION [RRI]
REPORT NUMBER: R055 (USMTF # F015)

GENERAL INSTRUCTIONS: Use to reply to requests for information. If the information is contained in a previous message, the RRI should reference that message in Line 6. Reference FM 34-3 and FM 101-5.

LINE 1 – DATE AND TIME _______________________________ (DTG)

LINE 2 – UNIT _______________________________ (Unit Making Report)

LINE 3 – REQUEST _______________________________ (Request Number of Originator)

LINE 4 – RESPONSE _______________________________ (Answer to Requested Information)

LINE 5 – DTG _______________________________ (DTG of Originator Request)

LINE 6 – NARRATIVE _______________________________ (Free Text for Additional Information Required for Clarification of Report)

LINE 7 – AUTHENTICATION _______________________________ (Report Authentication)
GENERAL INSTRUCTIONS: Use (1) to request road clearance and movement authority for the
movement of outsized or overweight vehicles or (2) for the movement of convoys over a controlled or

LINE 1 – DATE AND TIME ____________________________ (DTG)

LINE 2 – UNIT ______________________________________ (Unit Making Report)

LINE 3 – REFERENCE ________________________________ (Reference: Data to Identify
Request Being Referenced)

LINE 4 – UNIT ______________________________________ (Identifier or Designator of
Component Unit or Agency
Requesting Clearance on
Making Move)

LINE 5 – PRIORITY ________________________________ (Mission Priority Requested for
Movement)

LINE 6 – CONVOY NAME ____________________________ (Designated Convoy Name, if
Any)

LINE 7 – COUNT OF SERIALS ________________________ (Count of Serials in Convoy)

LINE 8 – SERIAL TIME ______________________________ (Convoy Serial Time Interval,
In Minutes)

LINE 9 – COUNT OF MARCH GROUPS ________________ (Count of March Groups in
Convoy)

LINE 10 – MARCH GROUP TIME ______________________ (Convoy March Group Interval,
in Minutes)

LINE 11 – HAZARDOUS CARGO ______________________ (Hazardous Cargo: YES or NO)

LINE 12 – START TIME ______________________________ (Latest DTG and Time Zone
Lead Vehicle is Planned to Pass Start Point)

LINE 13 – RATE OF MARCH __________________________ (Estimated Rate of March)

LINE 14 – START POINT ______________________________ (UTM or Six-Digit Grid
Coordinate With MGRS Grid Zone Designator of Starting Point)

**Continued on next page.
LINE 15 – START POC __________________________________________ (Name of Start Point of Contact at Requesting Unit)

LINE 16 – LOCATION __________________________________________ (Location of Start POC Using UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator)

LINE 17 – FREQUENCIES ______________________________________ (Start POC's Primary and Secondary Frequencies)

LINE 18 – PHONE NUMBERS ____________________________________ (Start POC's Primary and Secondary Phone Numbers)

LINE 19 – ARRIVAL TIME ______________________________________ (Estimated Arrival DTG of Moving Unit)

LINE 20 – END POINT _________________________________________ (Location of Ending Point Using UTM Accurate to 100 Meters, Same as Line 16)

LINE 21 – END POC __________________________________________ (Name of End Point of Contact at Requesting Unit)

LINE 22 – LOCATION __________________________________________ (Location of End POC Using UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator)

LINE 23 – FREQUENCIES ______________________________________ (End POC's Primary and Secondary Frequencies)

LINE 24 – PHONE NUMBERS ____________________________________ (End POC's Primary and Secondary Phone Numbers)

LINE 25 – ROUTE ____________________________________________ (Description of Route Desired by Requestor)

LINE 26 – VEHICLES __________________________________________ (Number and Type of Vehicles in Movement)

LINE 27 – LENGTH ____________________________________________ (Length of All Outsized Vehicles, or Length of Longest Vehicle in Inches)

**Continued on next page.**
TITLE: ROAD CLEARANCE REQUEST [ROADCLRREQ] (CONTINUED)
REPORT NUMBER: R060 {USMTF # D827}

LINE 28 – WIDTH __________________________________________ (Width of All Outsized Vehicles or Width of Widest Vehicle in Inches)

LINE 29 – HEIGHT _________________________________________ (Height of All Outsized Vehicles or Height of Highest Vehicle in Inches)

LINE 30 – WEIGHT _________________________________________ (Weight of All Overweight Vehicles or Weight of Heaviest Vehicle)

LINE 31 – LOAD CLASS ____________________________________ (Military Load Classification of Vehicles in Movement)

LINE 32 – HAZARDOUS CARGO DATA _________________ (Hazardous Cargo Classification, Shipping Name, Description, and Amount of Cargo)

LINE 33 – TRAFFIC CONTROL POINTS _________________________ (Proposed Traffic Control Points for the Road Movement)

**Repeat lines 4 through 33 to request road clearance for more than one unit. Assign sequential line numbers to succeeding iterations; for example, first iteration 4 through 33; second iteration 4a through 33a; and third iteration 4b through 33b; and so on.

LINE 34 – NARRATIVE _____________________________________ (Free Text for Additional Information Required for Clarification of Report)

LINE 35 – AUTHENTICATION _______________________________ (Report Authentication)
TITLE: ROUTE REPORT [ROUTEREP]
REPORT NUMBER: R065

GENERAL INSTRUCTIONS: Use to report results of route reconnaissance. Reference: FM 5-34, FM 17-95, and FM 17-98.

LINE 1 – DATE AND TIME ________________________________ (DTG)
LINE 2 – UNIT _________________________________________ (Unit Making Report)
LINE 3 – RECON TIME__________________________________ (DTG Start and Completion of Recon)
LINE 4 – RECOND ROUTE ________________________________ (Route Reconned)
LINE 5 – TRAFFICABILITY ________________________________ (Trafficability of Route)
LINE 6 – BUILT-UP AREAS ________________________________ (Built-up Areas Along Route/Grid Coordinates)
LINE 7 – LATERAL ROUTES ________________________________ (Lateral Routes Reconned/Results)
LINE 8 – BRIDGE CLASS ________________________________ (Bridge Classification Report/Grid Coordinates)
LINE 9 – FORDS ________________________________________ (Fords and Crossings Site/Grid Coordinates)
LINE 10 – BYPASSES ____________________________________ (Overpasses, Underpasses, Culverts/Grid Coordinates)
LINE 11 – OBSTACLES ________________________________ (UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator of All Obstacles, Minefields, Contaminated Areas)
LINE 12 – ENEMY ________________________________________ (Enemy Activity That Can Influence Route/Grid Coordinates)
LINE 13 – NARRATIVE ___________________________________ (Free Text for Additional Information Required for Clarification of Report)
LINE 14 – AUTHENTICATION _______________________________ (Report Authentication)
GENERAL INSTRUCTIONS: Use to authorize or refuse the implementation of specific rules of engagement. Reference: FM 101-5.

LINE 1 – DATE AND TIME _______________________________ (DTG)
LINE 2 – UNIT _________________________________________ (Unit Making Report)
LINE 3 – ROE APPROVED _______________________________ (Approved Rules of Engagement and Any Applicable Constraints)
LINE 4 – ROE DENIED _________________________________ (Rules of Engagement Being Denied)
LINE 5 – POLITICAL GUIDANCE __________________________ (Political Guidance Code for ROE Authorized)
LINE 6 – NARRATIVE ________________________________ (Free Text for Additional Information Required for Clarification of Report)
LINE 7 – AUTHENTICATION ____________________________ (Report Authentication)
GENERAL INSTRUCTIONS: Use to implement or cancel a specific rule of engagement. Reference: FM 101-5.

LINE 1 – DATE AND TIME _______________________________ (DTG)
LINE 2 – UNIT _______________________________ (Unit Making Report)
LINE 3 – ROE IMPLEMENT _______________________________ (Implemented Rules of Engagement With Constraints if Applicable)
LINE 4 – ROE CANCEL _______________________________ (Rules of Engagement Being Canceled)
LINE 5 – ROE SUMMARY _______________________________ (Summary of Rules of Engagement With Applicable Constraints in Effect Including Those Implemented by This Report)
LINE 6 – REPORTING POLICY _______________________________ (Reporting Policy Code)
LINE 7 – NARRATIVE _______________________________ (Free Text for Additional Information Required for Clarification of Report)
LINE 8 – AUTHENTICATION _______________________________ (Report Authentication)
GENERAL INSTRUCTIONS: Use to provide notification of a Subversion and Espionage Directed Against the Army (SAEDA) incident. Reference: FM 34-60 and AR 310-50.

LINE 1 – DATE AND TIME ______________________________ (DTG)

LINE 2 – UNIT ________________________________ (Unit Making Report)

LINE 3 – INCIDENT TIME ________________________________ (DTG of Incident)

LINE 4 – LOCATION ________________________________
(UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator)

LINE 5 – PERSONNEL ________________________________ (Personnel Involved)
   a. WITNESSES ________________________________
   b. SOURCES ________________________________
   c. SUSPECTS ________________________________

LINE 6 – ACTIONS ________________________________ (Actions Taken by Personnel and Unit Involved)

LINE 7 – POINT OF CONTACT ________________________________ (Unit POC and Contact Information)

LINE 8 – NARRATIVE ________________________________ (Free Text for Additional Information Required for Clarification of Report)

LINE 9 – AUTHENTICATION ________________________________ (Report Authentication)
TITLE: SCATTERABLE MINEFIELD RECORD [SCATMINREC]
REPORT NUMBER: S005

GENERAL INSTRUCTIONS: Use to report emplacement of scatterable mines (SCATMINE). IAW unit SOPs or SCATMINE planning and execution policy, units will prepare and submit SCATMINREC in enough time to allow the request to be disseminated to all affected units. Once executed, it is critical to report each obstacle as a separate SCATMINREC to ensure it gains immediate visibility. (Placing SCATMINREC in the obstacle database, which is how most of the normal obstacles will be reported, slows dissemination.) This is especially important if the obstacle is on a unit boundary or beyond the FLOT. Reference: FM 20-32, FM 90-7, and FM 5-34.

LINE 1 – DATE AND TIME ________________________________ (DTG)
LINE 2 – UNIT _________________________________________ (Unit Making Report)
LINE 3 – TGT/OBSTCL NO. _____________________________ (Target/Obstacle Number, as per Unit SOPs)
LINE 4 – EMLACING SYSTEM _____________________________ (Emplacing System (Volcano (Air or Ground), Artillery (Type), MOPMS, Air Delivered (Air Force), or Gator)

LINE 5 – ANTITANK MINES ____________________________ (YES or NO)
LINE 6 – ANTIPERSONNEL MINES _______________________ (YES or NO)
LINE 7 – LIFE CYCLE _________________________________ (DTG of Life Cycle Planned)
LINE 8 – AIM POINTS __________________________________ (Aim Points/Center Point of the Minefield)

a. ________________________________________________ (UTM or Six-Digit Grid of One Corner)
b. ________________________________________________ (UTM or Six-Digit Grid of One Corner)
c. ________________________________________________ (UTM or Six-Digit Grid of One Corner)
d. ________________________________________________ (UTM or Six-Digit Grid of One Corner)

**Continued on next page.**
TITLE: SCATTERABLE MINEFIELD RECORD [SCATMINREC] (CONTINUED)
REPORT NUMBER: S005

LINE 9 – AIM POINTS ______________________________________ (Aim Points/Center Point of the Minefield)
   a. _____________________________________________ (UTM or Six-Digit Grid of One Corner)
   b. _____________________________________________ (UTM or Six-Digit Grid of One Corner)
   c. _____________________________________________ (UTM or Six-Digit Grid of One Corner)
   d. _____________________________________________ (UTM or Six-Digit Grid of One Corner)

LINE 10 – AIM POINTS _____________________________________ (Aim Points/Center Point of the Minefield)
   a. _____________________________________________ (UTM or Six-Digit Grid of One Corner)
   b. _____________________________________________ (UTM or Six-Digit Grid of One Corner)
   c. _____________________________________________ (UTM or Six-Digit Grid of One Corner)
   d. _____________________________________________ (UTM or Six-Digit Grid of One Corner)

LINE 11 – AIM POINTS _____________________________________ (Aim Points/Center Point of the Minefield)
   a. _____________________________________________ (UTM or Six-Digit Grid of One Corner)
   b. _____________________________________________ (UTM or Six-Digit Grid of One Corner)
   c. _____________________________________________ (UTM or Six-Digit Grid of One Corner)
   d. _____________________________________________ (UTM or Six-Digit Grid of One Corner)

**Continued on next page.**
TITLE: SCATTERABLE MINEFIELD RECORD [SCATMINREC] (CONTINUED)
REPORT NUMBER: S005

LINE 12 – AIM POINTS _________________________________ (Aim Points/Center Point of the Minefield)

LINE 13 – AIM POINTS _________________________________ (Aim Points/Center Point of the Minefield)

LINE 14 – EMLACING _________________________________ (Unit Emplacing Mines and Report Number)

LINE 15 – SAFETY ZONE _______________________________ (Size of Safety Zone)

LINE 16 – MINEFIELD MARKING ________________________ (Type of Marking, if Applicable)

LINE 17 – APPROVING AUTHORITY _______________________ (Approving Authority Commander)

LINE 18 – POC THIS REPORT ___________________________ (Person Completing This Report)

LINE 19 – ACTIONS _________________________________ (Actions Taken by Personnel Involved)

LINE 20 – NARRATIVE _______________________________ (Free Text for Additional Information Required for Clarification of Report)

LINE 21 – AUTHENTICATION __________________________ (Report Authentication)
TITLE: SCATTERABLE MINEFIELD REQUEST [SCATMINREQ]
REPORT NUMBER: S010

GENERAL INSTRUCTIONS: Use to request authority to plan emplacement of scatterable mines (SCATMINE). IAW unit SOPs or the SCATMINE planning and execution policy, units will prepare and submit SCATMINREQ in enough time to allow the request to be staffed at the appropriate level and approval or disapproval returned to the requesting unit. Once a unit receives permission to plan a SCATMINE obstacle, it must still receive release authority before proceeding. This process is normally given when a scatterable minefield warning (SCATMINWARN) is sent 30 minutes prior to execution and the higher commander acknowledges and approves the release. Once the minefield is in place, a minefield/obstacle report (SCATMINREC) is sent to register the minefield. This is key, as the minefield may be on a unit boundary or beyond the FLOT. Reference: FM 20-32, FM 90-7, and FM 5-34.

LINE 1 – DATE AND TIME ________________________________ (DTG)

LINE 2 – UNIT _________________________________________ (Unit Making Report)

LINE 3 – TGT/OBSTCL NO. _______________________________ (Target/Obstacle Number, as per Unit SOPs)

LINE 4 – EMLACING SYSTEM ______________________________ (Emplacing System (Volcano (Air or Ground), Artillery (Type), MOPMS, Air Delivered (Air Force), or Gator)

LINE 5 – ANTITANK MINES______________________________ (YES or NO)

LINE 6 – ANTIPERSONNEL MINES_______________________ (YES or NO)

LINE 7 – ATTITUDE ____________________________________ (Attitude of Minefield)

LINE 8 – DIMENSIONS __________________________________ (Dimensions of Minefield)

LINE 9 – AIM POINTS ___________________________________ (Number of Aim Points/Corner Points With Grid Coordinates)

LINE 10 – SAFETY ZONE _________________________________ (Size of Safety Zone)

LINE 11 – MINEFIELD MARKING __________________________ (Type of Marking, if Applicable)

LINE 12 – UNIT OBSERVING ______________________________ (Unit Observing)

LINE 13 – MISSION ______________________________________ (Task, Purpose and Intent, if Required)

LINE 14 – LIFE CYCLE _________________________________ (DTG of Life Cycle Planned)

**Continued on next page.**
TITLE: SCATTERABLE MINEFIELD REQUEST [SCATMINREQ] (CONTINUED)
REPORT NUMBER: S010

LINE 15 – ACTIONS ________________________________________ (Actions Taken by Personnel Involved)

LINE 16 – NARRATIVE _____________________________________ (Free Text for Additional Information Required for Clarification of Report)

LINE 17 – AUTHENTICATION _______________________________ (Report Authentication)
TITLE: SCATTERABLE MINEFIELD WARNING (SCATMINWARN)
REPORT NUMBER: S015

GENERAL INSTRUCTIONS: Use to request authority to execute a planned scatterable minefield (SCATMINE) obstacle. Use the SCATMINREQ to request authority to plan a SCATMINE obstacle and the SCATMINREC to record an executed SCATMINE obstacle. Reference: FM 20-32, FM 90-7, and FM 5-34.

LINE 1 – DATE AND TIME __________________________________ (DTG)
LINE 2 – UNIT _____________________________________________ (Unit Making Report)
LINE 3 – TGT/OBSTCL NO. __________________________________ (Target/Obstacle Number, as per Unit SOPs)
LINE 4 – EMLACING SYSTEM ______________________________ (Emplacing System (Volcano (Air or Ground), Artillery (Type), MOPMS, Air Delivered (Air Force), or Gator)
LINE 5 – ANTITANK MINES _________________________________ (Antitank Mines (YES or NO))
LINE 6 – ANTIPERSONNEL MINES ___________________________ (Antipersonnel Mines (YES or NO))
LINE 7 – AIMING POINTS ___________________________________ (Grid Coordinates of Aim Points/Cornor Points, if Required Due to Refinement When Authorized)
LINE 8 – SAFETY ZONE ____________________________________ (Size of Safety Zone)
LINE 9 – MINEFIELD MARKING _____________________________ (Type of Marking, if Applicable)
LINE 10 – LIFE CYCLE _____________________________________ (DTG of Life Cycle)
LINE 11 – ACTIONS ________________________________________ (Actions Taken by Personnel Involved)
LINE 12 – NARRATIVE _____________________________________ (Free Text for Additional Information Required for Clarification of Report)
LINE 13 – AUTHENTICATION _______________________________ (Report Authentication)
TITLE: SEARCH AND RESCUE INCIDENT REPORT [SARIR]
REPORT NUMBER: S020 [USMTF # C482]

GENERAL INSTRUCTIONS: Use to report any situation that may require a search and rescue effort. Reference: FM 1-108 and FM 1-513.

LINE 1 – DATE AND TIME __________________________________ (DTG)
LINE 2 – UNIT _____________________________________________ (Unit Making Report)
LINE 3 – CALL SIGN _______________________________________ (Call Sign of Disabled or Lost Aircraft, Ship, Submarine, or Other)
LINE 4 – TYPE _____________________________________________ (Type of Disabled or Lost Aircraft, Ship, Submarine, or Other)
LINE 5 – COLOR ___________________________________________ (Color of Disabled or Lost Aircraft, Ship, Submarine, or Other)
LINE 6 – ID ________________________________________________ (Aircraft Tail or Side Number, Ship/Submarine Hull Number, or Other Number)
LINE 7 – LOCATION ________________________________________ (Location Disabled or Lost Aircraft, Ship, Submarine, or Other in UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator)
LINE 8 – QUALIFIER _______________________________________ (Location Qualifier: ACTUAL or ESTIMATED Followed by LAND or SEA)
LINE 9 – TIME OF INCIDENT ________________________________ (DTG of Incident)
LINE 10 – CAUSE __________________________________________ (Cause of Disabled or Lost Aircraft, Ship, Submarine, or Other)
LINE 11 – PERSONNEL _____________________________________ (Count of Personnel on Board and Qualifier: ACTUAL or ESTIMATED)
LINE 12 – STATUS __________________________________________ (Enter Count of Personnel and Their Statuses)

**Continued on next page.
LINE 13 – REQUIRE _____________________________ (Enter RCC or COMBINED ASSISTANCE if SAR Assistance is Required)

LINE 14 – POINT OF CONTACT ________________________ (Enter the Point of Contact and Telephone Number)

LINE 15 – NARRATIVE ________________________________ (Free Text for Additional Information Required for Clarification of Report)

LINE 16 – AUTHENTICATION ___________________________ (Report Authentication)
TITLE: SEARCH AND RESCUE (SAR) REQUEST [SARREQ]
REPORT NUMBER: S025 {USMTF # D669}

GENERAL INSTRUCTIONS: Use to request forces to participate in a search and rescue (SAR) mission. Reference: FM 1-108 and FM 1-513.

LINE 1 – DATE AND TIME ________________________________ (DTG)
LINE 2 – UNIT ________________________________ (Unit Making Report)
LINE 3 – REQUEST ________________________________ (Request Number)
LINE 4 – PRIORITY ________________________________ (Priority of Request: 1, 1A through 1Z; 2, 2A through 2Z; 3, 3A Through 3Z; 4, 4A through 4Z)
LINE 5 – TYPE ________________________________ (Air Mission Type)
LINE 6 – ON TIME ________________________________ (DTG Aircraft Are Requested to be at SAR Location or ASAP)
LINE 7 – OFF TIME ________________________________ (DTG Aircraft Are to Depart From SAR Location)
LINE 8 – NO. TYPE ________________________________ (Number and Type of Assets Requested)
LINE 9 – LOCATION ________________________________ (SAR Location in UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator)
LINE 10 – NARRATIVE ________________________________ (Free Text for Additional Information Required for Clarification of Report)
LINE 11 – AUTHENTICATION ________________________________ (Report Authentication)
**TITLE: SEARCH AND RESCUE SITUATION SUMMARY REPORT [SARSIT]**

**REPORT NUMBER: S030 {USMTF # C420}**

GENERAL INSTRUCTIONS: Use to coordinate, summarize, or terminate joint search and rescue operations. Reference: FM 1-108 and FM 1-513.

**LINE 1 – DATE AND TIME ________________________________ (DTG)**

**LINE 2 – UNIT _________________________________________ (Unit Making Report)**

**LINE 3 – MISSION NUMBER ________________________________ (Enter the JRCC SAR Mission Number)**

**LINE 4 – STATUS ________________________________________ (SAR Status: COMPLETED or TERMINATED if SAR Activity Has Ceased and Will Not be Resumed at a Later Time; SUSPENDED, if SAR Activity is Discontinued and Objective is Not Recovered)**

**LINE 5 – CALL SIGN _____________________________________ (Call Sign of Disabled or Lost Aircraft, Ship, Submarine, or Other)**

**LINE 6 – TYPE ___________________________________________ (Type of Disabled or Lost Aircraft, Ship, Submarine, or Other)**

**LINE 7 – LOCATION ______________________________________ (UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator of SAR Incident)**

**LINE 8 – PERSONNEL _____________________________________ (Number of Personnel Involved in Incident)**

**LINE 9 – PERSONNEL STATUS _____________________________ (Status of Personnel Involved in Incident (RECOVERED))**

**LINE 10 – NARRATIVE ___________________________________ (Free Text for Additional Information Required for Clarification of Report)**

**LINE 11 – AUTHENTICATION ________________________________ (Report Authentication)**
TITLE: SENSITIVE ITEMS REPORT [SENITREP]
REPORT NUMBER: S035


LINE 1 – DATE AND TIME ________________________________ (DTG)
LINE 2 – UNIT ________________________________ (Unit Making Report)
LINE 3 – STATUS ________________________________ (UP-100 percent Complete or UNIT GREEN to Denote Report With No Discrepancy; if Unit is Green Skip to Line 10; When Discrepancy is Noted Report UNIT RED and Continue Report)
LINE 4 – LOSING UNIT ________________________________ (Unit Making Report Loss)
LINE 5 – ITEM ________________________________ (Item Lost by Serial Number)
LINE 6 – DTG OF LOSS ________________________________ (DTG of Loss)
LINE 7 – DETAILS ________________________________ (Circumstances of Loss)
LINE 8 – ACTION TAKEN ________________________________ (Actions Taken to Recover the Item)
LINE 9 – NARRATIVE ________________________________ (Free Text for Additional Information Required for Clarification of Report)
LINE 10 – AUTHENTICATION ________________________________ (Report Authentication)
GENERAL INSTRUCTIONS: Use to warn commanders of severe weather affecting the area of operations. Transmit this message as required until normal weather communications are established. Reference: FM 34-81.

LINE 1 – DATE AND TIME ________________________________ (DTG)

LINE 2 – UNIT ________________________________ (Unit Making Report)

LINE 3 – VALID ____________________________________ (DTG the Warning is Effective From)

LINE 4 – UNTIL ____________________________________ (DTG the Warning is Effective to)

LINE 5 – WEATHER ____________________________________ (Atmosphere Conditions With Respect to Cloudiness, Precipitation, or Other Weather Phenomena)

LINE 6 – VISIBILITY ________________________________ (Minimum Visibility in Meters)

LINE 7 – CEILING ____________________________________ (Lowest Forecast Ceiling in Feet)

LINE 8 – SPEED ____________________________________ (Maximum Sustained Wind Speed in Knots)

LINE 9 – GUSTS ____________________________________ (Peak Wind Gusts in Knots)

LINE 10 – DIRECTION ________________________________ (Wind Direction in Degrees)

LINE 11 – NARRATIVE ________________________________ (Free Text for Additional Information Required for Clarification of Report)

LINE 12 – AUTHENTICATION ________________________________ (Report Authentication)
TITLE: SLANT REPORT [SLANTREP]
REPORT NUMBER: S045

GENERAL INSTRUCTIONS: Use to give the commander accurate and routine information regarding status of critical personnel and equipment necessary for the unit’s operation success. Submit when necessary or as directed. The commander designates the information to report during planning or by unit SOPs. Reference: FM 71-2 and FM 71-3.

LINE 1 – DATE AND TIME ________________________________ (DTG)

LINE 2 – UNIT ________________________________ (Unit Making Report)

LINE 3 – CDR’S INFO REQ ________________________________ (Commander’s Information Requirement)

LINE 4 – EQUIPMENT ________________________________

LINE 5 – PERSONNEL ________________________________

**Unit SOPs determine the items and the order they are reported in Lines 4 and 5.

EXAMPLE: M1A2/M2A3/AH-64/MLRS/19K. “Sent As 24 of 38/38 of 38/16 of 24/389 of 400”

LINE 6 – NARRATIVE ________________________________ (Free Text for Additional Information Required for Clarification of Report)

LINE 7 – AUTHENTICATION ________________________________ (Report Authentication)
TITLE: SORTIE ALLOTMENT [SORTIEALOT]
REPORT NUMBER: S050 {USMTF # A656}

GENERAL INSTRUCTIONS: Use to provide a means by which a joint force commander approves the air employment/allocation plans of his subordinate commanders and fills his subordinate commanders’ requests from sorties declared in excess in the subordinate command’s Air Allocation/Request Message. Reference: JP 3-56.1.

LINE 1 – DATE AND TIME ________________________________ (DTG)
LINE 2 – UNIT __________________________________________ (Unit Making Report)
LINE 3 – EMPLOYMENT PLAN ____________________________ (Significant Changes to Applicable Component’s Employment Plan)
LINE 4 – SUPPORT RECEIVED ____________________________ (Addressees Requests Filled; All Others Disapproved)
LINE 5 – REQUEST FILLED BY ____________________________ (Request Number and Component Filling Request)
LINE 6 – REQUEST FILLED BY ____________________________ (Request Number and Component Filling Request)
LINE 7 – REQUEST FILLED BY ____________________________ (Request Number and Component Filling Request)
LINE 8 – SUPPORT GIVEN ________________________________ (Requests to be Filled by Addressee)
LINE 9 – REQUEST ________________________________________ (Request Number)
LINE 10 – DATA __________________________________________ (Mission Type, Start and Stop Times, Number of Sorties Requested)
LINE 11 – REQUEST ________________________________________ (Request Number)
LINE 12 – DATA __________________________________________ (Mission Type, Start and Stop Times, Number of Sorties Requested)
LINE 13 – NARRATIVE ______________________________________ (Free Text for Additional Information Required for Clarification of Report)
LINE 14 – AUTHENTICATION ________________________________ (Report Authentication)
| LINE 1 – DATE AND TIME ____________________________ (DTG) |
| LINE 2 – UNIT ____________________________ (Unit Making Report) |
| LINE 3 – DATE/TIME ____________________________ (DTG of Spill Discovery) |
| LINE 4 – MATERIAL ____________________________ (Material Spilled) |
| LINE 5 – QUANTITY ____________________________ (Quantity of Spilled Material) |
| LINE 6 – LOCATION ____________________________ (UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator of Spill) |
| LINE 7 – CAUSE ____________________________ (Cause and Supervising Unit) |
| LINE 8 – SIZE ____________________________ (Size of Affected Area) |
| LINE 9 – DAMAGE ____________________________ (Damage to the Natural Environment (if required)) |
| LINE 10 – HAZARDS ____________________________ (Hazards to Friendly Forces and/or Civilian Personnel) |
| LINE 11 – ACTIONS ____________________________ (Summary of Actions Taken) |
| LINE 12 – UNIT POC ____________________________ (Supervising Unit POC) |
| LINE 13 – ASSISTANCE ____________________________ (Assistance Required/Requested) |
| LINE 14 – NARRATIVE ____________________________ (Free Text for Additional Information Required for Clarification of Report) |
| LINE 15 – AUTHENTICATION ____________________________ (Report Authentication) |
TITLE: SPOT REPORT [SPOTREP]
REPORT NUMBER: S060

GENERAL INSTRUCTIONS: Use to send information to provide timely intelligence or status regarding events that could have an immediate and significant effect on current planning and operations. Reference: FM 17-15, FM 17-98, and FM 7-7.

LINE 1 – DATE AND TIME ____________________________ (DTG)
LINE 2 – UNIT ______________________________________ (Unit Making Report)
LINE 3 – SIZE _________________________________________ (Size of Enemy Unit)
LINE 4 – ACTIVITY ______________________________________ (Enemy Activity at DTG of Report)
LINE 5 – LOCATION ____________________________________ (UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator of Enemy Activity or Event Observed)
LINE 6 – UNIT _________________________________________ (Enemy Unit)
LINE 7 – TIME ____________________________ (DTG of Observation)
LINE 8 – EQUIPMENT __________________________________ (Equipment of Unit Observed)
LINE 9 – SENDER’S ASSESSMENT __________________________ (Specific Sender Information)
LINE 10 – NARRATIVE _________________________________ (Free Text for Additional Information Required for Clarification of Report)
LINE 11 – AUTHENTICATION ____________________________ (Report Authentication)
TITLE: STOP JAMMING MESSAGE [STOPJAMMING]
REPORT NUMBER: S065 {USMTF # D675}

GENERAL INSTRUCTIONS: Use to terminate a jamming task being conducted by an EA asset. Reference: FM 34-40.

LINE 1 – DATE AND TIME ________________________________ (DTG)
LINE 2 – UNIT ________________________________________ (Unit Making Report)
LINE 3 – FREQUENCY _________________________________ (Enter the Radio Frequency or Enter ALL if Jamming is to Stop on All Frequencies)
LINE 4 – NARRATIVE _________________________________ (Free Text for Additional Information Required for Clarification of Report)
LINE 5 – AUTHENTICATION ___________________________ (Report Authentication)
GENERAL INSTRUCTIONS: Use to report any personnel who are in areas not authorized by current standing orders and are not assessed as missing in action. Reference: FM 19-1.

LINE 1 – DATE AND TIME ____________________________ (DTG)

LINE 2 – UNIT ____________________________________ (Unit Making Report)

LINE 3 – NUMBER __________________________________ (Number of Stragglers by Rank and Unit)

LINE 4 – LOCATION __________________________________ (Location of Stragglers Picked Up: UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator)

LINE 5 – AA ______________________________________ (Disposition/Location of Straggler AA)

LINE 6 – NARRATIVE ________________________________ (Free Text for Additional Information Required for Clarification of Report)

LINE 7 – AUTHENTICATION __________________________ (Report Authentication)
GENERAL INSTRUCTIONS: Use to report information pertaining to nuclear detonations on areas outside the North American continent. This report will support damage assessment at the national level. Reference: FM 3-14.

LINE 1 – DATE AND TIME ________________________________ (DTG)

LINE 2 – UNIT __________________________________________ (Unit Making Report)

LINE 3 – AS OF _________________________________________ (As of DTG for Applicability of NUDETSUM Information)

LINE 4 – SEQUENCE ________________________________ (Serial Number Assigned to This Nuclear Detonation)

LINE 5 – PLACE ________________________________________ (Place or Area Name of the Nuclear Detonation)

LINE 6 – COORDINATES __________________________________ (Detonation’s UTM or Six-Digit Grid Coordinate With Grid Zone Designator)

LINE 7 – DETONATION ________________________________ (DTG Detonation Occurred)

***Repeat lines 4 through 7 to report all observed nuclear detonations.

LINE 8 – NARRATIVE ____________________________________ (Free Text for Additional Information Required for Clarification of Report)

LINE 9 – AUTHENTICATION ______________________________ (Report Authentication)
TITILE: SUPPORT-AIR CORRIDOR [SPRT.AIRCOR]
REPORT NUMBER: S080 {USMTF # A263}

GENERAL INSTRUCTIONS: Use to report, modify, or cancel an airspace coordination area to fire support agencies. Reference: FM 100-103.

LINE 1 – DATE AND TIME ________________________________ (DTG)
LINE 2 – UNIT ________________________________________ (Unit Making Report)
LINE 3 – POI __________________________________________ (Primary Option Indicator. Enter ADD, AMEND, or CANCEL)
LINE 4 – PLAN _________________________________________ (Fire Plan Designation)
LINE 5 – NAME ________________________________________ (Air Corridor Name)
LINE 6 – FROM ________________________________________ (DTG Effective From)
LINE 7 – TO ___________________________________________ (DTG Effective To)
LINE 8 – ZONE ALFA _________________________________ (UTM Grid Zone and 100-KM Square)
LINE 9 – POINT ALFA _________________________________ (UTM 1-Meter Easting and UTM 1-Meter Northing)
LINE 10 – ALFA WIDTH ________________________________ (Width in Meters)
LINE 11 – ALFA MIN _________________________________ (Minimum Altitude in Meters)
LINE 12 – ALFA MAX _________________________________ (Maximum Altitude in Meters)
LINE 13 – ZONE BRAVO _______________________________ (UTM Grid Zone and 100-KM Square)
LINE 14 – POINT BRAVO _______________________________ (UTM 1-Meter Easting and UTM 1-Meter Northing)
LINE 15 – BRAVO WIDTH ______________________________ (Width in Meters)
LINE 16 – BRAVO MIN ________________________________ (Minimum Altitude in Meters)
LINE 17 – BRAVO MAX ________________________________ (Maximum Altitude in Meters)

**Continued on next page.
TITLE: SUPPORT-AIR CORRIDOR [SPRT.AIRCOR] (CONTINUED)
REPORT NUMBER: S080 {USMTF # A263}

LINE 18 – ZONE CHARLIE ____________________________ (UTM Grid Zone and 100-KM Square)

LINE 19 – POINT CHARLIE____________________________ (UTM 1-Meter Easting and UTM 1-Meter Northing)

LINE 20 – CHARLIE WIDTH __________________________ (Width in Meters)

LINE 21 – CHARLIE MIN_____________________________ (Minimum Altitude in Meters)

LINE 22 – CHARLIE MAX_____________________________ (Maximum Altitude in Meters)

LINE 23 – ZONE DELTA _____________________________ (UTM Grid Zone and 100-KM Square)

LINE 24 – POINT DELTA_____________________________ (UTM 1-Meter Easting and UTM 1-Meter Northing)

LINE 25 – DELTA WIDTH ____________________________ (Width in Meters)

LINE 26 – DELTA MIN_______________________________ (Minimum Altitude in Meters)

LINE 27 – DELTA MAX_______________________________ (Maximum Altitude in Meters)

LINE 28 – ZONE ECHO _______________________________ (UTM Grid Zone and 100-KM Square)

LINE 29 – POINT ECHO______________________________ (UTM 1-Meter Easting and UTM 1-Meter Northing)

LINE 30 – ECHO WIDTH ______________________________ (Width in Meters)

LINE 31 – ECHO MIN_______________________________ (Minimum Altitude in Meters)

LINE 32 – ECHO MAX_______________________________ (Maximum Altitude in Meters)

LINE 33 – ZONE FOXTROT ___________________________ (UTM Grid Zone and 100-KM Square)

LINE 34 – POINT FOXTROT___________________________ (UTM 1-Meter Easting and UTM 1-Meter Northing)

LINE 35 – FOXTROT WIDTH _________________________ (Width in Meters)

**Continued on next page.**
TITLE: SUPPORT-AIR CORRIDOR [SPRT.AIRCOR] (CONTINUED)
REPORT NUMBER: S080 {USMTF # A263}

LINE 36 – FOXTROT MIN ___________________________________ (Minimum Altitude in Meters)
LINE 37 – FOXTROT MAX ___________________________________ (Maximum Altitude in Meters)
LINE 38 – ZONE GOLF______________________________________ (UTM Grid Zone and 100-KM Square)
LINE 39 – POINT GOLF _____________________________________ (UTM 1-Meter Easting and UTM 1-Meter Northing)
LINE 40 – GOLF WIDTH ____________________________________ (Width in Meters)
LINE 41 – GOLF MIN _______________________________________ (Minimum Altitude in Meters)
LINE 42 – GOLF MAX _______________________________________ (Maximum Altitude in Meters)
LINE 43 – ZONE HOTEL ____________________________________ (UTM Grid Zone and 100-KM Square)
LINE 44 – POINT HOTEL____________________________________ (UTM 1-Meter Easting and UTM 1-Meter Northing)
LINE 45 – NARRATIVE _____________________________________ (Free Text for Additional Information Required for Clarification of Report)
LINE 46 – AUTHENTICATION _______________________________ (Report Authentication)
TITLE: SUPPORT-BATTLEFIELD GEOMETRY [SPRT.GEOM]
REPORT NUMBER: S085 {USMTF # A262}

GENERAL INSTRUCTIONS: Use to transfer, amend, cancel, or propose any battlefield geometry (which includes fire support coordination measures) in support of land combat operations. Reference: FM 100-103.

LINE 1 – DATE AND TIME ________________________________ (DTG)
LINE 2 – UNIT ________________________________ (Unit Making Report)
LINE 3 – POI ________________________________ (Primary Option Indicator. Enter ADD, AMEND, or CANCEL)
LINE 4 – SOI ________________________________ (Secondary Option Indicator. Enter ADDED POINTS if ADD is in Line 1 and Additional Points Will Follow in Another Report)
LINE 5 – PLAN ________________________________ (Fire Plan Designation)
LINE 6 – FROM ________________________________ (DTG Effective From)
LINE 7 – TO ________________________________ (DTG Effective to)
LINE 8 – BGT ________________________________ (Battlefield Geometry Type)
LINE 9 – NAME ________________________________ (Battlefield Geometry Type Name)
LINE 10 – AUTHORITY ________________________________ (Coordination/Establishing Authority)
LINE 11 – ONE GRID ________________________________ (UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator)
LINE 12 – TWO GRID ________________________________ (UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator)
LINE 13 – THREE GRID ________________________________ (UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator)

**Continued on next page.
TITLE: SUPPORT-BATTLEFIELD GEOMETRY [SPRT.GEOM] (CONTINUED)
REPORT NUMBER: S085 {USMTF # A262}

LINE 14 – FOUR GRID ________________________________ (UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator)

LINE 15 – FIVE GRID ________________________________ (UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator)

LINE 16 – CIRCLE __________________________________ (UTM Grid Zone and 100-KM Square, UTM 1-Meter Easting, and UTM 1-Meter Northing)

LINE 17 – RADIUS __________________________________ (Circular Area Radius in Meters)

LINE 18 – AMMO-RESTRICTED ________________________ (Restrictive Fire Area Restricted Ammo Indicator)

LINE 19 – AMMO-RESTRICTED ________________________ (Restrictive Fire Area Restricted Ammo Indicator)

LINE 20 – BOUNDARY POINT __________________________ (Coordinate Point Sequence Number)

LINE 21 – NAME ____________________________________ (Boundary Name)

LINE 22 – BOUNDARY POINT __________________________ (Coordinate Point Sequence Number)

LINE 23 – NAME ____________________________________ (Boundary Name)

LINE 24 – NARRATIVE ________________________________ (Free Text for Additional Information Required for Clarification of Report)

LINE 25 – AUTHENTICATION ___________________________ (Report Authentication)
GENERAL INSTRUCTIONS: Use (1) to establish nuclear damage categories and (2) to disseminate command guidance establishing chemical avoidance criteria within damage avoidance areas. Reference: FM 3-3-1.

LINE 1 – DATE AND TIME ________________________ (DTG)

LINE 2 – UNIT ___________________________________________ (Unit Making Report)

LINE 3 – POI ______________________________________________ (Primary Option Indicator. Enter ADD, AMEND, or CANCEL)

LINE 4 – PLAN__________________________________________ (Fire Plan Designation)

LINE 5 – AREA NAME ______________________________________ (Damage Avoidance Area Name)

LINE 6 – ZONE ____________________________________________ (UTM Grid Zone and 100-KM Square)

LINE 7 – ONE GRID ________________________________________ (UTM 1-Meter Easting, UTM 1-Meter Northing)

LINE 8 – TWO GRID ________________________________________ (UTM 1-Meter Easting, UTM 1-Meter Northing)

LINE 9 – THREE GRID ________________________________________ (UTM 1-Meter Easting, UTM 1-Meter Northing)

LINE 10 – FOUR GRID _________________________________________ (UTM 1-Meter Easting, UTM 1-Meter Northing)

LINE 11 – FIVE GRID _________________________________________ (UTM 1-Meter Easting, UTM 1-Meter Northing)

LINE 12 – SIX GRID _________________________________________ (UTM 1-Meter Easting, UTM 1-Meter Northing)

LINE 13 – SEVEN GRID ________________________________________ (UTM 1-Meter Easting, UTM 1-Meter Northing)

LINE 14 – EIGHT GRID ________________________________________ (UTM 1-Meter Easting, UTM 1-Meter Northing)

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<td>24</td>
<td>AUTHENTICATION</td>
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</table>
TITLE: SURVEILLANCE AND RECONNAISSANCE PLAN REPORT [SURRECONREP]
REPORT NUMBER: S095


LINE 1 – DATE AND TIME ____________________________ (DTG)

LINE 2 – UNIT ________________________________ (Unit Making Report)

LINE 3 – OPERATION ____________________________ (Period and Operation Covered)

LINE 4 – PIR/IR ________________________________ (Identify the Collection Emphasis by Type and by the CCIR (PIR/IR) it is Assigned, Include the Task and Purpose of Collector to IR)

LINE 5 – EMPHASIS ________________________________ (Collection Emphasis by Discipline)
   a. SIGINT ________________________________
   b. HUMINT ________________________________
   c. IMINT ________________________________

LINE 6 – SORs ________________________________

LINE 7 – NARRATIVE ________________________________ (Free Text for Additional Information Required for Clarification of Report)

LINE 8 – AUTHENTICATION ________________________________ (Report Authentication)
TITLE: SURVEY-CONTROL POINT ACCESS REQUEST [SURV.TPAC]
REPORT NUMBER: S100 {USMTF # D272}

GENERAL INSTRUCTIONS: Use to retrieve survey control points by circular, thrust line, or rectangular search. The report provides a means to request survey control point data. These control points provide potential starting and closing points for the extension of control. Reference: FM 6-2.

LINE 1 – DATE AND TIME ________________________________ (DTG)

LINE 2 – UNIT ____________________________________________ (Unit Making Report)

LINE 3 – ORDER ___________________________________________ (Order of Survey Accuracy)

LINE 4 – ZONE ____________________________________________ (UTM Grid Zone and 100-KM Square)

LINE 5 – CIRCLE __________________________________________ (UTM 1-Meter Easting and UTM 1-Meter Northing)

LINE 6 – RADIUS __________________________________________ (Circular Area Radius, Survey Search)

LINE 7 – ONE GRID ________________________________________ (UTM 1-Meter Easting, UTM 1-Meter Northing)

LINE 8 – TWO GRID _________________________________________ (UTM 1-Meter Easting, UTM 1-Meter Northing)

LINE 9 – WIDTH ___________________________________________ (Width of Thrust Line in Meters)

LINE 10 – NARRATIVE _______________________________________ (Free Text for Additional Information Required for Clarification of Report)

LINE 11 – AUTHENTICATION _______________________________ (Report Authentication)
GENERAL INSTRUCTIONS: Use to establish, cancel, or transmit SCP data. Reference: FM 6-2.

LINE 1 – DATE AND TIME ____________________________ (DTG)
LINE 2 – UNIT ____________________________ (Unit Making Report)
LINE 3 – POI ____________________________ (Primary Option Indicator. Enter ADD, AMEND, or CANCEL)
LINE 4 – ORDER ____________________________ (Order of Survey Accuracy)
LINE 5 – CONTROL POINT ____________________________ (Survey Control Point Name)
LINE 6 – UTM EAST ____________________________ (UTM .01-Meter Higher Order Easting)
LINE 7 – UTM NORTH ____________________________ (UTM .01-Meter Higher Order Northing)
LINE 8 – ALTITUDE ____________________________ (SCP Altitude to 0.1-Meter)
LINE 9 – SOURCE ____________________________ (Source of Station Data)
LINE 10 – STATION DESCRIPTION ____________________________ (Description, Control Point Station)
LINE 11 – ROUTE ____________________________ (Description of Route to SCP)
LINE 12 – ALFA ____________________________ (First Azimuth Mark Name)
LINE 13 – MARK ALFA ____________________________ (Description, Azimuth Mark)
LINE 14 – AZIMUTH TO ALFA ____________________________ (Azimuth to the Nearest One Thousandth of a Mil)
LINE 15 – BRAVO ____________________________ (Second Azimuth Mark Name)
LINE 16 – MARK BRAVO ____________________________ (Description, Azimuth Mark)
LINE 17 – AZIMUTH TO BRAVO ____________________________ (Azimuth to the Nearest One Thousandth of a Mil)
LINE 18 – NARRATIVE ____________________________ (Free Text for Additional Information Required for Clarification of Report)
LINE 19 – AUTHENTICATION ____________________________ (Report Authentication)
TITLE: SURVIVABILITY REPORT [SURREP]
REPORT NUMBER: S108

GENERAL INSTRUCTIONS: Use to report the completion of survivability tasks. Survivability tasks include digging, revetment, camouflage, and hardening of buildings. Reference: FM 5-34, FM 5-100, and FM 5-102.

LINE 1 – DATE AND TIME ____________________________ (DTG)
LINE 2 – UNIT ____________________________ (Unit Making Report)
LINE 3 – UNIT TYPE ____________________________ (Type of Unit)
LINE 4 – TASK SERIAL NUMBER ____________________________ (Unique Task Identifying Number)
LINE 5 – OBSTACLE ZONE/BELT NUMBER ____________________________ (Zone, Belt Letter and Number)
LINE 6 – SURVIVABILITY MISSION ____________________________ (Type of Mission, Protective Works, Camouflage)
LINE 7 – SURVIVABILITY TASK ____________________________ (Task, CP, Fighting Positions)
LINE 8 – TYPE OF POSITION ____________________________ (Type of Position)
LINE 9 – ECHELON ____________________________ (Echelon of Unit)
LINE 10 – MAP SHEET NUMBERS ____________________________ (Map Sheet Numbers Relevant to Report)
LINE 11 – NAME OF NEAREST TOWN ____________________________ (Name of Nearby Town)
LINE 12 – COMPLETION TIME ____________________________ (DTG When Task Was Completed)
LINE 13 – NARRATIVE ____________________________ (Free Text for Additional Information Required for Clarification of Report)
LINE 14 – AUTHENTICATION ____________________________ (Report Authentication)
GENERAL INSTRUCTIONS: Use to reply to a message received when a structured message does not exist or when it is necessary to provide plain text information. Reference: FM 11-32.

LINE 1 – DATE AND TIME ________________________________ (DTG)

LINE 2 – UNIT ________________________________ (Unit Making Report)

LINE 3 – REPORT TYPE ________________________________ (Report Type)

LINE 4 – ORIGINATOR ________________________________ (Originator)

LINE 5 – SERIAL ________________________________ (Report Serial Number)

LINE 6 – REPLY ________________________________ (Type of Reply Report. Enter ACKNOWLEDGE, WILL COMPLY, MODIFY EXECUTION, EXECUTION IMPOSSIBLE, VERIFICATION REQUESTED, EXECUTION COMPLETED)

LINE 7 – NARRATIVE ________________________________ (Free Text for Additional Information Required for Clarification of Report)

LINE 8 – AUTHENTICATION ________________________________ (Report Authentication)
TITLE: SYSTEM-REQUEST FOR REPORT [SYS.RFR]
REPORT NUMBER: S115 {USMTF # D260}

GENERAL INSTRUCTIONS: Use in fire support operations (1) to request a one-time fire support report or (2) to establish a standing requirement for a report. Reference: FM 6-71.

LINE 1 – DATE AND TIME __________________________________ (DTG)
LINE 2 – UNIT ______________________________ (Unit Making Report)
LINE 3 – POI ______________________________ (Primary Option Indicator. Enter ADD, AMEND, or CANCEL)
LINE 4 – PLAN ______________________________ (Fire Plan Designation)
LINE 5 – REPORT TYPE ______________________________ (Type of Fire Support Report)
LINE 6 – FREQUENCY ______________________________ (Report Frequency)
LINE 7 – FROM ______________________________ (DTG Effective From)
LINE 8 – TO ______________________________ (DTG Effective to)
LINE 9 – TARGET LIST ______________________________ (Target List/Last Target Indicator)
LINE 10 – GEOMETRY TYPE ______________________________ (Battlefield Geometry Type)
LINE 11 – GEOMETRY NAME ______________________________ (Battlefield Geometry Type Name)
LINE 12 – ELEMENT ______________________________ (Section, Platoon, Battery/Company, Battalion/Regiment, and Regiment/Brigade/Division Designators, or Ship Call Sign(s))
LINE 13 – NARRATIVE ______________________________ (Free Text for Additional Information Required for Clarification of Report)
LINE 14 – AUTHENTICATION ______________________________ (Report Authentication)
TITLE: TACTICAL ELINT REPORT [TACELINT]
REPORT NUMBER: T001 {USMTF # C121}


LINE 1 – DATE AND TIME ________________________________ (DTG)
LINE 2 – UNIT _________________________________________ (Unit Making Report)
LINE 3 – TARGET ________________________________________ (Target Identifier–BE Number, Target Signal Number, PIN Number, or RACKET Number)
LINE 4 – BETWEEN ________________________________ (DTG Detected)
LINE 5 – AND _________________________________________ (DTG LOST or PRESENT if Still Emitting)
LINE 6 – EMITTER ______________________________________ (Emitter Call Sign and Name or Nomenclature)
LINE 7 – LOCATION____________________________________ (UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator)
LINE 8 – LENGTH ______________________________________ (Length of Ellipse Semi-Major Axis)
LINE 9 – WIDTH ________________________________________ (Width of Ellipse Semi-Minor Axis)
LINE 10 – AXIS _________________________________________ (Axis Orientation)
LINE 11 – PARAMETERS FOLLOW___________________________ (Alerts Addressee That the Following 10 Lines Contain Systems Parameters. If you are sending more than one set of parameters, state the number of the set being sent.)

EXAMPLE: PARAMETERS FOLLOW; SYSTEM ONE.
LINE 12 – FREQUENCY ________________________________ (Frequency of Signal)
LINE 13 – MODE_______________________________________ (RF Operational Mode)

**Continued on next page.
TITLE: TACTICAL ELINT REPORT [TACELINT] (CONTINUED)
REPORT NUMBER: T001 {USMTF # C121}

LINE 14 – INTERVAL ________________________________ (Pulse Repetition Interval)

LINE 15 – ACTIVITY ________________________________ (Pulse Repetition Interval Activity)

LINE 16 – DURATION ________________________________ (Pulse Duration)

LINE 17 – SCAN ________________________________ (Scan Type)

LINE 18 – RATE ________________________________ (Scan Type)

LINE 19 – POLARIZATION ________________________________ (Antenna Polarization)

LINE 20 – BEARING ________________________________ (Bearing of the Signal From the Detecting Unit's Position)

** Repeat lines 11 through 20 to report multiple mission/mission data. Assign sequential line numbers to succeeding iterations; for example, first iteration 11-15; second iteration 11a-15a; third iteration 11b-15b; and so on.

LINE 21 – NARRATIVE ________________________________ (Free Text for Additional Information Required for Clarification of Report)

LINE 22 – AUTHENTICATION ________________________________ (Report Authentication)
GENERAL INSTRUCTIONS: Use to provide data required to request establishment of a temporary cemetery and special burial procedures/ceremonies. Reference: FM 10-296.

LINE 1 – DATE AND TIME ________________________________ (DTG)

LINE 2 – UNIT ________________________________ (Unit Making Report)

LINE 3 – REQUESTING AGENCY ________________________________ (Identification of the Component/Unit Making the Request)

LINE 4 – COORDINATES ________________________________ (UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator of the Requesting Unit)

LINE 5 – SITE JUSTIFICATION ________________________________ (Reason a Temporary Burial Site is Necessary)

LINE 6 – FEATURE ________________________________ (Prominent Terrain Feature of the Proposed Site)

LINE 7 – COORDINATES ________________________________ (UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator of the Area Containing the Features Listed in the Preceding Line)

LINE 8 – NAME ________________________________ (Cemetery Name or Title)

LINE 9 – GRADIENT ________________________________ (Relative Terrain Gradient (GENTLY ROLLING, MODERATE, STEEP, or VERY STEEP))

LINE 10 – DRAINAGE ________________________________ (Type of Drainage (NATURAL, MAN-MADE, or NONE))

LINE 11 – SOIL ________________________________ (Type of Soil)

LINE 12 – LAND USE ________________________________ (Current Use of the Land)

LINE 13 – ROAD NUMBER ________________________________ (Access Road Number)

**Continued on next page.
TITLE: TEMPORARY BURIAL SITE REQUEST [TEMPBURIALSITEREQ] (CONTINUED)

REPORT NUMBER: T005 {USMTF # B964}

LINE 14 – ROAD NAME_____________________________________ (Name of Access Road to Cemetery Site)

LINE 15 – ROAD SURFACE__________________________________ (Type of Surface on Access Road)

LINE 16 – VEGETATION__________________________________ (Type of Vegetation)

LINE 17 – LOCAL LABOR___________________________________ (Number of Local Laborers Available)

LINE 18 – EQUIPMENT___________________________________ (Type, Name, or Nomenclature of Available Cemetery Equipment)

LINE 19 – BURIAL TYPE____________________________________ (Type of Special Burial Procedure/Ceremony Requested)

LINE 20 – PERSONNEL QUANTITY AND CLASS_______________ (Quantity and Classification of Remains (Military and Whether US, Allied, or Enemy))

**Transmit lines 19 and 20 for a special burial request.

**Repeat lines 19 through 20 to request multiple types of special burial procedures/ceremonies. Assign sequential line numbers to succeeding iterations; for example, first iteration 19 through 20; second iteration 19a through 20a; third iteration 19b through 20b; and so on.

LINE 21 – BURIAL JUSTIFICATION __________________________ (Reason for Requesting Mass Burial)

LINE 22 – NARRATIVE _____________________________________ (Free Text for Additional Information Required for Clarification of Report)

LINE 23 – AUTHENTICATION _______________________________ (Report Authentication)
TITLE: TRACK MANAGEMENT MESSAGE [TRKMAN]  
REPORT NUMBER: T010 {USMTF # F752}

GENERAL INSTRUCTIONS: Use to report and resolve dual designations and differences in identity, category, and Identification Friend or Foe (IFF)/Selective Identification Feature (SIF). Reference: FM 44-100.

LINE 1 – DATE AND TIME ________________________________ (DTG)

LINE 2 – UNIT _________________________________________ (Unit Making Report)

LINE 3 – CONFLICT _____________________________________ (Type of Conflict: ID, CATEGORY, IFF, DUAL DESIGNATION, POSITION, ALTITUDE, SIZE, AIR OR SURFACE TYPE)

LINE 4 – TRACK ________________________________________ (Track Number)

LINE 5 – POSITION _____________________________________ (UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator)

LINE 6 – YOUR _________________________________________ (Track Information)

LINE 7 – MY ___________________________________________ (Track Information)

LINE 8 – RESOLUTION _________________________________ (Resolution of Conflict)

LINE 9 – NARRATIVE ________________________________ (Free Text for Additional Information Required for Clarification of Report)

LINE 10 – AUTHENTICATION ____________________________ (Report Authentication)
TITLE: TRACK/POINT REPORT [TRKREP]
REPORT NUMBER: T015 {USMTF # F753}

GENERAL INSTRUCTIONS: Use to report, update, or drop air, surface, subsurface, and ground tracks or points in the absence of a TADIL A or TADIL B link. Reference: FM 44-100.

LINE 1 – DATE AND TIME ________________________________ (DTG)
LINE 2 – UNIT ________________________________ (Unit Making Report)
LINE 3 – ID ________________________________ (Identification: FRIENDLY, UNKNOWN, HOSTILE)
LINE 4 – POSITION ________________________________ (UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator)
LINE 5 – TRACK ________________________________ (Track Number)
LINE 6 – HEADING ________________________________ (Direction of Travel in Degrees True or Magnetic)
LINE 7 – SPEED ________________________________ (Speed of Movement in Knots)
LINE 8 – ALTITUDE ________________________________ (Altitude in Hundreds of Feet)
LINE 9 – ENGAGED ________________________________ (Engagement Status: YES or NO)
LINE 10 – NO. TYPE ________________________________ (Number and Type of Craft: Two MIG 21s, Three Destroyers)
LINE 11 – SQUAWK ________________________________ (IFF/SIF Mode and Code)
LINE 12 – MODE FOUR ________________________________ (Confirmed Friend, No Response, Not Interrogated)
LINE 13 – CATEGORY ________________________________ (Track Type: AIR, LAND, SURFACE, SUBSURFACE, or POINT)
LINE 14 – NARRATIVE ________________________________ (Free Text for Additional Information Required for Clarification of Report)
LINE 15 – AUTHENTICATION ________________________________ (Report Authentication)
TITLE: TRANSPORTATION SUPPORT REQUEST [TRANSSPTREQ]
REPORT NUMBER: T020 [USMTF # D825]

GENERAL INSTRUCTIONS: Use to request transportation support other than airlift support. Reference: FM 701-58.

LINE 1 – DATE AND TIME ______________________________ (DTG)
LINE 2 – UNIT ________________________________________ (Unit Making Report)
LINE 3 – UNIT IDENTIFIER ____________________________ (Identifier or Unit/Agency Requesting Transportation Support)
LINE 4 – CALL SIGN _________________________________ (Call Sign of Unit)
LINE 5 – TELEX _________________________________ (Unit/Agency Telex Number)
LINE 6 – UNIT POC ________________________________ (Designated Unit POC)
LINE 7 – RANK/RATE ________________________________ (POC Rank or Rate and Rating)
LINE 8 – PRIMARY PHONE ___________________________ (Unit POC Primary Telephone Number)
LINE 9 – PRIMARY FREQUENCY ________________________ (Unit Primary Radio Frequency)
LINE 10 – POC LOCATION ____________________________ (Unit POC Location Using UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator)
LINE 11 – SECONDARY PHONE _________________________ (Unit POC Secondary Telephone Number)
LINE 12 – SECONDARY FREQUENCY ____________________ (Unit Secondary Radio Frequency)
LINE 13 – BILLING __________________________________ (Required Billing Instructions)
LINE 14 – PRIORITY _________________________________ (Requestor-Assigned Priority Number)
LINE 15 – MODE ___________________________________ (Requestor's Preferred Mode of Transportation)

**Continued on next page.
TITLE: TRANSPORTATION SUPPORT REQUEST [TRANSSPTREQ] (CONTINUED)
REPORT NUMBER: T020 {USMTF # D825}

LINE 16 – PICKUP TIME ____________________________________ (Desired Pickup DTG for Cargo/Passengers Being Moved)

LINE 17 – ON-LOAD________________________________________ (UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator of On-Load/Pickup Point)

LINE 18 – DELIVERY _______________________________________ (Desired Delivery Time for Cargo/Passengers Being Moved)

LINE 19 – OFF-LOAD_______________________________________ (UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator of Off-Load Point)

LINE 20 – COUNT __________________________________________ (Count of Cargo/Passengers to be Transported)

LINE 21 – TYPE____________________________________________ (Type of Cargo/Passengers to be Transported)

LINE 22 – LENGTH_________________________________________ (Linear, End-to-End Measurement, of Each Type of Equipment)

LINE 23 – WIDTH __________________________________________ (Linear, Side-to-Side Measurement, of Each Type of Equipment)

LINE 24 – HEIGHT _________________________________________ (Vertical Dimension of Each Type of Equipment)

LINE 25 – WEIGHT _________________________________________ (Weight of Each Type of Equipment)

LINE 26 – HAZARDOUS DATA ______________________________ (Required Hazardous Cargo Data According to Federal Regulation 49 And Joint Service Regulations)

LINE 27 – ADDITIONAL SUPPORT ___________________________ (Additional Support Requirements at On-Load or Off-Load Points, if Applicable)

** Continued on next page. **
TITLE: TRANSPORTATION SUPPORT REQUEST [TRANSSPTREQ] (CONTINUED)
REPORT NUMBER: T020 {USMTF # D825}

LINE 28 – POC FUNCTION ___________________________ (Name of the Function of the Mission POC)

LINE 29 – CALL SIGN ____________________________ (Call Sign of the Unit to Contact)

LINE 30 – REQUESTING POC ________________________ (Name of the Requesting Unit POC)

LINE 31 – RANK/RATE _____________________________ (Rank or Rate and Rating of Requesting POC)

LINE 32 – PRIMARY PHONE _________________________ (Unit POC Primary Telephone Number)

LINE 33 – PRIMARY FREQUENCY _____________________ (Primary Radio Frequency of Requesting Unit)

LINE 34 – POC LOCATION __________________________ (UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator of Reporting Unit POC)

LINE 35 – SECONDARY PHONE ______________________ (Requesting POC Secondary Telephone Number)

LINE 36 – SECONDARY FREQUENCY ___________________ (Secondary Radio Frequency of the Requesting Unit)

**Repeat lines 14 through 36 to initiate multiple requests for transportation support. Assign sequential line numbers to succeeding iterations; for example, first iteration 14 through 36; second iteration 14a through 36a; third iteration 14b through 36b; and so on.

LINE 37 – NARRATIVE _____________________________ (Free Text for Additional Information Required for Clarification of Report)

LINE 38 – AUTHENTICATION ________________________ (Report Authentication)
GENERAL INSTRUCTIONS: Use to reply to a transportation support request. Reference: FM 701-58.

LINE 1 – DATE AND TIME ____________________________ (DTG)

LINE 2 – UNIT ________________________________________ (Unit Making Report)

LINE 3 – UNIT IDENTIFIER ____________________________ (Identifier of Unit/Agency Responding for Transportation Support)

LINE 4 – CALL SIGN __________________________________ (Call Sign of the Unit)

LINE 5 – TELEX ______________________________________ (Unit/Agency Telex Number)

LINE 6 – UNIT POC ____________________________________ (Designated Responding POC)

LINE 7 – RANK/RATE _________________________________ (POC Rank or Rate and Rating)

LINE 8 – PRIMARY PHONE _____________________________ (Unit POC Primary Telephone Number)

LINE 9 – PRIMARY FREQUENCY __________________________ (Responding Unit Primary Radio Frequency)

LINE 10 – POC LOCATION _______________________________ (UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator of Reporting Unit POC)

LINE 11 – SECONDARY PHONE __________________________ (Unit POC Secondary Telephone Number)

LINE 12 – SECONDARY FREQUENCY ______________________ (Responding Unit Secondary Radio Frequency)

LINE 13 – BILLING____________________________________ (Required Billing Instructions)

LINE 14 – STATUS ____________________________________ (Disposition/Status Using APPROVED, DISAPPROVED, or MODIFIED, as Applicable)

LINE 15 – SUPPORT UNIT______________________________ (Supporting Unit Identifier or Designator, if Applicable)

**Continued on next page.
**TITLE: TRANSPORTATION SUPPORT RESPONSE [TRANSSPTRES] (CONTINUED)**

**REPORT NUMBER: T025 {USMTF # D826}**

| LINE 16 | CALL SIGN ______________________________________ (Call Sign of the Supporting Unit) |
| LINE 17 | ON-LOAD SUPPORT EQUIPMENT NAME ____________ (Literal Name or Nomenclature of Support Equipment to be Provided at On-Load Point) |
| LINE 18 | ON-LOAD SUPPORT EQUIPMENT COUNT ___________ (Number of Pieces of Support Equipment Assigned) |
| LINE 19 | OFF-LOAD SUPPORT EQUIPMENT NAME ___________ (Literal Name or Nomenclature of Support Equipment to be Provided at Off-Load Point) |
| LINE 20 | OFF-LOAD SUPPORT EQUIPMENT COUNT __________ (Number of Pieces of Support Equipment Assigned) |
| LINE 21 | SUPPORT POC ___________________________________ (Supporting Unit POC Name) |
| LINE 22 | RANK/RATE _____________________________________ (Rank or Rate and Rating of Supporting POC) |
| LINE 23 | PRIMARY PHONE ________________________________ (Supporting Unit POC Primary Telephone Number) |
| LINE 24 | PRIMARY FREQUENCY ___________________________ (Primary Radio Frequency of the Supporting Unit) |
| LINE 25 | POC LOCATION __________________________________ (UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator of Reporting Unit POC) |
| LINE 26 | SECONDARY PHONE _____________________________ (Supporting Unit POC Secondary Telephone Number) |
| LINE 27 | SECONDARY FREQUENCY ________________________ (Secondary Radio Frequency of the Supporting Unit) |
| LINE 28 | TRANSPORTATION MODE ________________________ (Mode of Transportation to be Provided, if the Mode is Other Than That Requested) |

**Continued on next page.**
LINE 29 – PICKUP TIME ____________________________________ (Pickup DTG for Movement, if the DTG is Other Than That Requested)

LINE 30 – ON-LOAD POINT ____________________________________ (On-Load Point Location, if Other Than That Requested, Using UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator)

LINE 31 – DELIVERY TIME ____________________________________ (Delivery DTG for Movement, if the DTG is Other Than That Requested)

LINE 32 – OFF-LOAD POINT ____________________________________ (Off-Load Point Location, if Other Than That Requested, Using UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator)

LINE 33 – PRIORITY _______________________________________ (Priority Assigned by Supporting Unit if it is Other Than That Requested)

**Repeat lines 14 to 33 to reply to different/multiple requests for transportation support. Assign sequential line numbers to succeeding iterations; for example, first iteration 14 through 33; second iteration 14a through 33a; third iteration 14b through 33b; and so on.

LINE 34 – NARRATIVE _____________________________________ (Free Text for Additional Information Required for Clarification of Report)

LINE 35 – AUTHENTICATION _______________________________ (Report Authentication)
GENERAL INSTRUCTIONS: Use to inform commanders of operational plans, unit readiness, and operational situations or summaries. Reference: FM 100-15, FM 71-100, FM 71-3, and FM 71-2.

LINE 1 – DATE AND TIME __________________________________ (DTG)
LINE 2 – UNIT _____________________________________________ (Unit Making Report)
LINE 3 – FROM ____________________________________________ (Earliest DTG Zulu Report is Valid)
LINE 4 – UNTIL ____________________________________________ (Latest DTG Zulu Report is Valid)
LINE 5 – MAP _____________________________________________ (UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator)
LINE 6 – ENEMY ___________________________________________ (Enemy Activity Being Reported to Include: Nationality, Location, Mission, and Time of Sighting)
LINE 7 – NONHOSTILE _____________________________________ (Nonhostile Information Being Reported)
LINE 8 – OWN _____________________________________________ (Activities of Own Forces Including Changes in Location of Units/Formations, and Activities of Forces Not Attached to Originating Unit)
LINE 9 – TYPE _____________________________________________ (Type of Boundary Area or Line Being Described)
LINE 10 – POINT A_________________________________________ (Start Point for Boundary Line or Trace Being Described in UTM or Six-Digit Grid Coordinate with MGRS Grid Zone Designator)
LINE 11 – POINT B _________________________________________ (Second Point to Describe Line or Trace)
LINE 12 – POINT C _________________________________________ (Third Point to Describe Line or Trace)

**Continued on next page.
TITLE: UNIT SITUATION REPORT [UNITSITREP] (CONTINUED)
REPORT NUMBER: U001 {USMTF # C403}

LINE 13 – POINT D ________________________________ (Fourth Point to Describe Line or Trace)

LINE 14 – POINT E ________________________________ (Fifth Point to Describe Line or Trace)

LINE 15 – UNIT ________________________________ (Unit Designator for the Reported Unit)

LINE 16 – LOCATION ________________________________ (UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator of Unit)

LINE 17 – UNITS ________________________________ (Total Number of Units Being Reported)

LINE 18 – READY ________________________________ (Total Number of Units Reporting C1, C2, or C3 Readiness)

LINE 19 – UNIT ________________________________ (Unit Designator for Units With Less Than C3 Readiness Status)

LINE 20 – LOCATION ________________________________ (UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator of Unit)

LINE 21 – STATUS ________________________________ (Degree to Which Unit is Combat Ready: C4 or C5)

LINE 22 – REASON ________________________________ (Reason Unit has Less Than C3 Rating: RESOURCE, SUPPLY, TRAINING)

LINE 23 – READY ________________________________ (Estimated Time Unit Will Achieve Combat Readiness Status)

LINE 24 – ADMINISTRATION ________________________________ (Administration and Logistics Information Being Reported, to Include: KIA, WIA, MIA, NCW, and Equipment Lost/Damaged)

**Continued on next page.
TITLE: UNIT SITUATION REPORT [UNITSITREP] (CONTINUED)
REPORT NUMBER: U001 {USMTF # C403}

LINE 25 – GENERAL ________________________________ (General Information Being Reported)

LINE 26 – SAFETY ________________________________ (Commander's Safety Risk Assessment for Next Operation)

LINE 27 – NARRATIVE ________________________________ (Free Text for Additional Information Required for Clarification of Report)

LINE 28 – AUTHENTICATION _____________________________ (Report Authentication)
TITLE: US MEDICAL STATUS FIELD REPORT [USMEDFLDREP]
REPORT NUMBER: U005

GENERAL INSTRUCTIONS: Use to provide status of significant medical interests affecting the overall medical capability or health of command. Reference: FM 8-10-3.

LINE 1 – DATE AND TIME ________________________________ (DTG)
LINE 2 – UNIT ________________________________ (Unit Making Report)
LINE 3 – LOCATION ________________________________ (Reporting Unit UTM or Six-Digit Grid Coordinate With Grid Zone Designator)
LINE 4 – SHIP ________________________________ (Ship Name (if Required))

LINE 5 – BED STAT
a. OPERATING ________________________________ (Number Beds Operating)
b. NO. OCCUPIED ________________________________ (Number Beds Occupied)
c. NO. ARMY ________________________________ (Number Army Patients)
d. NO. NAVY ________________________________ (Number Navy Patients)
e. NO. MARINE ________________________________ (Number Marine Patients)
f. NO. AIR FORCE ________________________________ (Number Air Force Patients)
g. NO. EPW ________________________________ (Number EPW Patients)
h. NO. US CIVILIAN ________________________________ (Number US Civilian Patients)
i. NO. ALLIED CIVILIAN ________________________________ (Number Allied Civilian Patients)
j. NO. OTHER ________________________________ (Number Other Patients)

LINE 6 – STATUS ________________________________ (Patients Status by Service)
a. NO. RTD ________________________________ (Number RTD in 72 Hours)
b. NO. EVAC ________________________________ (Number EVAC to CONUS)
c. NO. DOW ________________________________ (Number DOW)

LINE 7 – DAYS CLASS VIII ________________________________ (Days of Class VIII OH)
LINE 8 – DAYS BLOOD ________________________________ (Days Blood Supply OH)
LINE 9 – CHRONIC PROBLEMS ________________________________ (Chronic Problems)
LINE 10 – NARRATIVE ________________________________ (Free Text for Additional Information Required for Clarification of Report)
LINE 11 – AUTHENTICATION ________________________________ (Report Authentication)
TITLE: WAR CRIME REPORTABLE INCIDENT REPORT [WCRIR]
REPORT NUMBER: W001

GENERAL INSTRUCTIONS: Use to convey flash traffic to the commander relating to a possible, suspected, or alleged violation of the law of war discovered within the command.

LINE 1 – DATE AND TIME ____________________________ (DTG)
LINE 2 – UNIT ____________________________________________ (Unit Making Report)
LINE 3 – TIME OF INCIDENT ____________________________ (Time the Incident Occurred)
LINE 4 – TIME OF DISCOVERY ____________________________ (Time the Incident Discovered)
LINE 5 – LOCATION OF INCIDENT ___________________________ (Where Incident Occurred/UTM or Six-Digit Grid Coordinates with MGRS Grid Zone Designator)
LINE 6 – PERSON(S) DISCOVERING__________________________ (Names(s)/Unit(s) of Person(s) Discovering the Incident)
LINE 7 – SUMMARY _______________________________________ (Narrative Description Including the Who, What, When, Where and How)
LINE 8 – UNITS IN AREA _________________________________ (Identity of Location and Point of Contact for All Evidence)
LINE 9 – LOCATION OF EVIDENCE __________________________ (Identity of Location and Point of Contact for All Evidence)
LINE 10 – AUTHENTICATION _______________________________ (Report Authentication)
TITLE: WARNING MESSAGE-AIR DEFENSE [AIRDEFWARN]
REPORT NUMBER: W003 {USMTF # F715}

GENERAL INSTRUCTIONS: Use to transmit air defense warnings and weapons control conditions. Reference: FM 44-100.

LINE 1 – DATE AND TIME _________________________________ (DTG)

LINE 2 – UNIT ________________________________________ (Unit Making Report)

LINE 3 – WARNING ____________________________________ (Air Defense Warning: WHITE, YELLOW, or RED)

LINE 4 – STATUS ______________________________________ (Weapon Control Status: Free, Tight, or Hold)

LINE 5 – EFFECTIVE ____________________________________ (Effective DTG; Transmit Only if Effective Time is Not Immediate)

LINE 6 – AREA ________________________________________ (Area or Sector Affected)

LINE 7 – BY __________________________________________ (Call Sign of Declaring Authority)

LINE 8 – NARRATIVE ___________________________________ (Free Text for Additional Information Required for Clarification of Report)

LINE 9 – AUTHENTICATION ______________________________ (Report Authentication)
GENERAL INSTRUCTIONS: Use to convey a preliminary notice of an impending order or action. Reference: FM 101-5-1 and FM 101-5.

LINE 1 – DATE AND TIME ________________________________ (DTG)
LINE 2 – UNIT ______________________________________ (Unit Making Report)
LINE 3 – WARNING ORDER ______________________________ (Warning Order Number)
LINE 4 – REFERENCES ____________________________________ (References)
LINE 5 – TIME ZONE _____________________________________ (TZ Used in WARNORD)
LINE 6 – TASK ORGANIZATION _____________________________ (Optional)
LINE 7 – SITUATION
  a. ENEMY______________________________________ (Enemy Forces)
  b. FRIENDLY ___________________________________ (Friendly Forces)
  c. ATTACH/DET ________________________________ (Attach/Detachments)
LINE 8 – MISSION _______________________________________
LINE 9 – EXECUTION INTENT______________________________
  a. CONCEPT____________________________________ (Concept of Operation)
  b. MAN TASKS _________________________________ (Tasks to Maneuver Units)
  c. CS TASKS ___________________________________ (Tasks to CS Units)
  d. INSTRUCTIONS ______________________________ (Coordinating Instructions)
     (1) CCIR ____________________________________
     (2) Risk MGT _________________________________
     (3) Deception __________________________________
     (4) Priorities _________________________________
     (5) Time Line _________________________________
     (6) Rehearsals ________________________________
     (7) Orders GRP MTG___________________________
     (8) Earliest MVMT TIME _______________________

**Continued on next page.**
LINE 10 – SERVICE AND SUPPORT
   a. SPECIAL EQUIPMENT ____________________________ (Special Equipment)
   b. TRANSPORTATION ______________________________ (Transportation)

LINE 11 – COMMAND AND SIGNAL
   a. COMMAND ________________________________ (Command)
   b. SIGNAL ________________________________ (Signal)

LINE 12 – ACKNOWLEDGE ______________________________ (Mandatory)

LINE 13 – CDR NAME/RANK ________________________________ (Commander’s Name and Rank)

LINE 14 – NARRATIVE ________________________________ (Free Text for Additional Information Required for Clarification of Report)

LINE 15 – AUTHENTICATION ________________________________ (Report Authentication)
TITLE: WATER SUPPLY POINT [WTRSUPPT]
REPORT NUMBER: W010 {USMTF # F864}

GENERAL INSTRUCTIONS: Use to provide operational information about the water supply. Reference: FM 10-52.

LINE 1 – DATE AND TIME ____________________________ (DTG)
LINE 2 – UNIT _________________________________ (Unit Making Report)
LINE 3 – SUPPORT UNIT ____________________________ (Designation of the Supporting Unit)
LINE 4 – FROM ________________________________ (DTG for Beginning of Period Applying to Operational Information)
LINE 5 – TO ________________________________ (DTG for End of Period Applying to Operational Information)
LINE 6 – POTABLE LOCATION ______________________________ (UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator of Potable Water Supply Point)
LINE 7 – POTABLE STATUS ____________________________ (OPERATIONAL, NOT OPERATIONAL, or LIMITED)
LINE 8 – POTABLE AVAILABLE ____________________________ (Gallons of Potable Water Available at Water Supply Point)
LINE 9 – POINT CAPACITY ________________________________ (Daily Production Capacity in Gallons)
LINE 10 – WATER UNIT ________________________________ (Name or Designator of Unit Providing Support Shown in Line 11)
LINE 11 – NONPOTABLE LOCATION ________________________________ (UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator of Nonpotable Water Supply Point)
LINE 12 – NONPOTABLE AVAILABLE ____________________________ (Gallons of Nonpotable Water Available at Water Supply Point)

**Continued on next page.
**Repeat lines 4 through 13 if necessary. Assign sequential line numbers to succeeding iterations; for example, first iteration 4 through 13; second iteration 4a through 13a; third iteration 4b through 13b; and so on.**

**LINE 13 – NONPOTABLE CAPACITY _________________________ (Daily Production Capacity in Gallons)**

**LINE 14 – NARRATIVE ___________________________________ (Free Text for Additional Information Required for Clarification of Report)**

**LINE 15 – AUTHENTICATION _______________________________ (Report Authentication)**
GENERAL INSTRUCTIONS: Use to send flash weather information that will affect current unit operations. Reference: FM 34-81.

LINE 1 – DATE AND TIME _________________________________ (DTG)
LINE 2 – UNIT _________________________________ (Unit Making Report)
LINE 3 – REPORT LINE _______________________________ (Report Line From 0117)
LINE 4 – SUMMARY _______________________________ (Summary of Warning)
LINE 5 – TIME OF WATCH _______________________________ (DTG From-to DTG as of DTG of Watch)
LINE 6 – AREA _______________________________ (Area Affected)
LINE 7 – NARRATIVE _______________________________ (Free Text for Additional Information Required for Clarification of Report)
LINE 8 – AUTHENTICATION _______________________________ (Report Authentication)
GENERAL INSTRUCTIONS: Use to provide the commander with forecasted weather expected in the area of operation until normal weather communications can be established. Update forecasts at least every six hours. Reference: FM 34-81.

LINE 1 – DATE AND TIME ___________________________ (DTG)

LINE 2 – UNIT ___________________________ (Unit Making Report)

LINE 3 – LOCATION ___________________________ (Center of Forecasted Weather Expressed Using UTM or Six-Digit Grid Coordinate With MGRS Grid Zone Designator)

LINE 4 – VARIATION ___________________________ (Weather Variation With Respect to Time: INTERMITTENT, GRADUAL, or TEMPORARY)

LINE 5 – VALID ___________________________ (DTG Zulu Forecast is Effective)

LINE 6 – UNTIL ___________________________ (DTG Zulu Forecast is No Longer in Effect)

LINE 7 – CEILING ___________________________ (Lowest Forecast Ceiling in Hundreds of Feet Above Ground Level)

LINE 8 – COVER ___________________________ (Total Sky Coverage in Eighths)

LINE 9 – VISBY ___________________________ (Prevailing Visibility in Meters)

LINE 10 – WEATHER ___________________________ (Type of Weather Phenomena Being Forecast)

LINE 11 – MAX ___________________________ (Maximum Temperature Forecasted in Degrees Celsius)

LINE 12 – MIN ___________________________ (Minimum Temperature Forecasted in Degrees Celsius)

LINE 13 – FREEZE LEVEL ___________________________ (Minimum Freezing Level in Thousands of Feet)

**Continued on next page.**
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REPORT NUMBER: W020 {USMTF # C521}

LINE 14 – WIND ________________________________ (Direction and Variable Wind Direction in Degrees)
LINE 15 – SPEED ________________________________ (Maximum Sustained Wind Speed in Knots)
LINE 16 – GUSTS ________________________________ (Peak Gusts in Knots)
LINE 17 – ALTIMETER ___________________________ (Altimeter Setting in Hundredths of Inches of Mercury)
LINE 18 – WIND@2000ft ____________________________ (Wind Direction and Speed at 2000 Feet)
LINE 19 – WIND@5000ft ____________________________ (Wind Direction and Speed at 5000 Feet)
LINE 20 – WIND@10,000ft ____________________________ (Wind Direction and Speed at 10,000 Feet)
LINE 21 – WIND@15,000ft ____________________________ (Wind Direction and Speed at 15,000 Feet)
LINE 22 – WIND@20,000ft ____________________________ (Wind Direction and Speed at 20,000 Feet)
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<td>EOD</td>
<td>explosive ordinance disposal</td>
</tr>
<tr>
<td>EPW</td>
<td>enemy prisoner of war</td>
</tr>
<tr>
<td>ES</td>
<td>electronic surveillance; electronic warfare support</td>
</tr>
<tr>
<td>EVAC</td>
<td>evacuation</td>
</tr>
<tr>
<td>EW</td>
<td>electronic warfare; early warning</td>
</tr>
<tr>
<td>FA</td>
<td>field artillery</td>
</tr>
<tr>
<td>FASCAM</td>
<td>family of scatterable mines</td>
</tr>
<tr>
<td>FEBA</td>
<td>forward edge of the battle area</td>
</tr>
<tr>
<td>FLOT</td>
<td>forward line of own troops</td>
</tr>
<tr>
<td>FM</td>
<td>field manual; fire mission</td>
</tr>
<tr>
<td>FN</td>
<td>foreign nation</td>
</tr>
<tr>
<td>FRAGO</td>
<td>fragmentary order</td>
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<tr>
<td>G4</td>
<td>Assistant Chief of Staff, G4 (Logistics)</td>
</tr>
<tr>
<td>Gator</td>
<td>A scatterable mine system delivered by Air Force andNavy tactical aircraft</td>
</tr>
<tr>
<td>GEOLOC</td>
<td>geographic location</td>
</tr>
<tr>
<td>GEOREF</td>
<td>World Geographic Reference</td>
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<tr>
<td>GS</td>
<td>general support</td>
</tr>
<tr>
<td>GSR</td>
<td>general support reinforcing; gynecology</td>
</tr>
<tr>
<td>Abbreviation</td>
<td>Description</td>
</tr>
<tr>
<td>--------------</td>
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</tr>
<tr>
<td>H-hour</td>
<td>specific time at which an operation or exercise is scheduled to start</td>
</tr>
<tr>
<td>HUMINT</td>
<td>human intelligence</td>
</tr>
<tr>
<td>IAW</td>
<td>in accordance with</td>
</tr>
<tr>
<td>ICAO</td>
<td>International Civil Aviation Organization</td>
</tr>
<tr>
<td>ICM</td>
<td>improved conventional munitions; intelligence collection management</td>
</tr>
<tr>
<td>ID</td>
<td>identification</td>
</tr>
<tr>
<td>IEW</td>
<td>intelligence and electronic warfare</td>
</tr>
<tr>
<td>IFF</td>
<td>identification friend or foe</td>
</tr>
<tr>
<td>IMINT</td>
<td>imagery intelligence</td>
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<tr>
<td>intel</td>
<td>intelligence</td>
</tr>
<tr>
<td>INTREP</td>
<td>intelligence report</td>
</tr>
<tr>
<td>IR</td>
<td>information requirement</td>
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<tr>
<td>J-3</td>
<td>Operations Directorate of joint staff</td>
</tr>
<tr>
<td>J-6</td>
<td>Command, Control, Communications, and Computer System Directorate of a joint staff</td>
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<tr>
<td>JMEM</td>
<td>Joint Munitions Effectiveness Manual</td>
</tr>
<tr>
<td>JOC</td>
<td>Joint Operations Center</td>
</tr>
<tr>
<td>JP</td>
<td>jet petroleum; joint publication</td>
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<tr>
<td>JRCC</td>
<td>joint rescue coordination center</td>
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<tr>
<td>KIA</td>
<td>killed in action</td>
</tr>
<tr>
<td>KM</td>
<td>kilometer</td>
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<td>KT</td>
<td>kilotons</td>
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<td>lat</td>
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</tr>
<tr>
<td>LD</td>
<td>line of departure</td>
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<td>LN.XX</td>
<td>liaison</td>
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<td>LOGPAC</td>
<td>logistics package</td>
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<td>long</td>
<td>longitude</td>
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<td>LRP</td>
<td>Logistics Release Point</td>
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<td>landing zone</td>
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<td>MASINT</td>
<td>measurement and signature intelligence</td>
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<tr>
<td>MBBLs</td>
<td>thousands of barrels</td>
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<td>MC</td>
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<td>MCM</td>
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<td>MEDREGREP</td>
<td>Medical Regulating Report</td>
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<td>MET.CF</td>
<td>Meteorological - Fallout Message</td>
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<tr>
<td>MET.CM</td>
<td>Meteorological - Computer Message</td>
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<tr>
<td>MET.TA</td>
<td>Meteorological - Target Acquisition Message</td>
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<td>MFR</td>
<td>memorandum for record management</td>
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<td>MHz</td>
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<td>MIA</td>
<td>missing in action</td>
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<tr>
<td>MICLIC</td>
<td>mine-clearing line charge</td>
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<tr>
<td>MIJI</td>
<td>meaconing, intrusion, jamming and interference</td>
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<td>MLRS</td>
<td>multiple launch rocket system</td>
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<td>MOGAS</td>
<td>motor gasoline</td>
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<td>MOPMS</td>
<td>Modular Pack Mine System</td>
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<tr>
<td>MOPP</td>
<td>mission-oriented protective posture</td>
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<td>military occupational specialty</td>
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<tr>
<td>MP</td>
<td>psychiatric</td>
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<tr>
<td>MPH</td>
<td>miles per hour</td>
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<td>MSD</td>
<td>minimum safe distance</td>
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<td>msn</td>
<td>mission</td>
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<td>main supply route</td>
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<td>megaton</td>
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<td>medical treatment element</td>
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<td>movement</td>
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<td>North Atlantic Treaty Organization</td>
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<td>navigation</td>
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<tr>
<td>NBC</td>
<td>nuclear, biological, and chemical</td>
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<td>NCA</td>
<td>National Command Authorities</td>
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<td>NCO</td>
<td>noncommissioned officer</td>
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<td>NCW</td>
<td>not complied with</td>
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<td>NE</td>
<td>Northeast; Netherlands</td>
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<td>NMC</td>
<td>not mission capable</td>
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<td>number on hand</td>
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<td>nuclear detonations summary report</td>
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<td>O&amp;I</td>
<td>operations and intelligence</td>
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<td>OB</td>
<td>obstetrics; order of battle</td>
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<tr>
<td>Abbreviation</td>
<td>Definition</td>
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<td>------------------------------------------------</td>
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<td>off</td>
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<td>OH</td>
<td>on hand</td>
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<tr>
<td>OPREP</td>
<td>operational report</td>
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<tr>
<td>OR</td>
<td>operational readiness</td>
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<td>PA</td>
<td>public affairs</td>
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<tr>
<td>pam</td>
<td>pamphlet</td>
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<tr>
<td>PAO</td>
<td>public affairs office/officer</td>
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<tr>
<td>PID</td>
<td>plan identification number</td>
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<tr>
<td>PIR</td>
<td>priority intelligence requirements</td>
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<td>PM</td>
<td>provost marshal</td>
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<td>POC</td>
<td>Point of Contact</td>
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<tr>
<td>POI</td>
<td>primary option indicator</td>
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<tr>
<td>POL</td>
<td>petroleum, oils, and lubricants</td>
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<tr>
<td>PSG</td>
<td>platoon sergeant</td>
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<td>PSS</td>
<td>personnel service support</td>
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<td>PZ</td>
<td>pickup zone</td>
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<td>R</td>
<td>reinforcing</td>
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<td>RCC</td>
<td>rescue coordination center</td>
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<td>RDD</td>
<td>required delivery date</td>
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<td>return to duty</td>
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<td>S4</td>
<td>logistics staff officer brigade and below</td>
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<td>SAEDA</td>
<td>Subversion and Espionage Directed Against the Army</td>
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<td>SAR</td>
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<td>burn</td>
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<td>sensor report</td>
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<td>Special Forces</td>
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<td>SG</td>
<td>obstetrics/gynecology</td>
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<tr>
<td>SIF</td>
<td>selective identification feature</td>
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<td>signal intelligence</td>
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<td>standing operating procedures</td>
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<td>SPIREP</td>
<td>Spot Intelligence Report</td>
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<td>Standing Request for Information</td>
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<td>surgery</td>
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<td>maxillo</td>
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<td>neuro; social security number</td>
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<td>Tactical Air Defense Information Link</td>
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<tr>
<td>TM</td>
<td>target material</td>
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<td>TOA</td>
<td>trade-off analysis; Transportation Operating Agency</td>
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<td>US Army Training and Doctrine Command</td>
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<td>UAV</td>
<td>unmanned aerial vehicle</td>
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<td>UMT</td>
<td>unit ministry team</td>
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<td>United States</td>
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<td>United States Air Force</td>
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<td>UTM</td>
<td>Universal Transverse Mercator</td>
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<td>VIP</td>
<td>very important person</td>
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<td>warning order</td>
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<td>wounded in action</td>
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<td>WILCO</td>
<td>will comply with transmission</td>
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<td>warrant officer</td>
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