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*"Rummaging in the government's attic"*

Description of document: Eleven (11) Secretary of Defense Forms, 1963-2011

Requested date: 19-July-2017

Released date: 12-January-2018

Posted date: 26-March-2018

Source of document: OSD/JS FOIA Requester Service Center  
Office of Freedom of Information  
1155 Defense Pentagon  
Washington, DC 20301-1155  
Fax: (571) 372-0500

[Office of the Secretary of Defense and Joint Staff's FOIA Online Submission Form](#)

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**DEPARTMENT OF DEFENSE  
OFFICE OF FREEDOM OF INFORMATION  
1155 DEFENSE PENTAGON  
WASHINGTON, DC 20301-1155**

JAN 12 2018

Ref: 17-F-1351

This responds to your July 19, 2017 Freedom of Information Act (FOIA) request, which is attached for your convenience. We received your request on July 26, 2017 and assigned it case number 17-F-1351.

The Washington Headquarters Services, Directives Division conducted a search of their records systems and located the enclosed 13 pages determined to be responsive to your request.

This constitutes a full grant of your request, and closes your case file in this office. There are no assessable fees associated with this response.

I trust that this information fully satisfies your request. If you need further assistance or would like to discuss any aspect of your request, please do not hesitate to contact the Action Officer assigned to your request, Cheryl Jenkins, at [cheryl.d.jenkins2.civ@mail.mil](mailto:cheryl.d.jenkins2.civ@mail.mil) or 571-372-0445. Our FOIA Public Liaison, Jim Hogan, is also available to assist you and may be reached at 571-372-0462.

Sincerely,

A handwritten signature in black ink, appearing to read "Stephanie L. Carr", is written over the typed name. To the left of the signature is a small, stylized handwritten mark.

Stephanie L. Carr  
Chief

Enclosures:  
As stated.



**OFFICE OF THE GENERAL COUNSEL, DEPARTMENT OF DEFENSE  
LEGISLATIVE ROUTING SLIP**

1. DATE

2. SUBJECT

ROUTING	TO	ROUTING	TO
Secretary of the Army ATTN: Chief of Legislative Liaison		Director, Defense Logistics Agency ATTN: Counsel	
Secretary of the Navy ATTN: Chief of Legislative Affairs		Director, Defense Mapping Agency ATTN: Counsel	
Secretary of the Air Force ATTN: Director, Legislative Liaison		Director, Defense Nuclear Agency ATTN: Counsel	
Under Secretary of Defense for Research and Engineering		Director, Defense Security Assistance Agency	
Under Secretary of Defense for Policy		Director, National Security Agency ATTN: Counsel	
Chairman, Joint Chiefs of Staff ATTN: Administrative Assistant		AGC (Fiscal Matters)	
Executive Secretary		AGC (International and Intelligence)	
ASD (Command, Control and Communications Intelligence)		AGC (Legal Counsel)	
ASD (Comptroller) ATTN: AGC (Fiscal Matters)		AGC (Logistics)	
ASD (Acquisition and Logistics)		AGC (Personnel and Health Policy)	
ASD (Force Management and Personnel)		OTHER (Specify)	
ASD (Health Affairs)			
ASD (Legislative Affairs)			
ASD (Public Affairs)		<b>TYPE OF ACTION REQUIRED</b>	
ASD (Reserve Affairs)		Preparation of DoD Report	1
Inspector General, Department of Defense		Advise if Any Objectives	2
		Comments and Recommendations	3
Director, Operational Test and Evaluation		Information	4
Director, Program Analysis and Evaluation		Information, Pending Submission of Proposed Report	5
Deputy Assistant Secretary of Defense (Administration), OASD (Comptroller)		Implementation	6
Director, Defense Advanced Research Projects Agency		Appropriate Action	7
Director, Defense Audiovisual Agency		OTHER (Specify)	8
Director, Defense Communications Agency ATTN: Counsel			
Director, Defense Contract Audit Agency ATTN: Counsel			
Director, Defense Intelligence Agency ATTN: Counsel		<b>ADDRESS REPLY TO:</b>	
Director, Defense Investigative Service		GENERAL COUNSEL, DEPARTMENT OF DEFENSE ATTN: Director, Legislative Reference Service Telephone Number: (202) 697-1305	

3. REMARKS

4. ACTION AGENCY

**DIRECTORATE FOR FREEDOM OF INFORMATION AND SECURITY REVIEW (DFOISR)  
COORDINATION RECORD**

1. TO	2. CASE NO.
	3. DATE

<b>4. DESCRIPTION</b>		
a. TYPE OF DOCUMENT	b. NUMBER OF PAGES	c. CLASSIFICATION
d. SUBJECT	e. REQUESTOR	
f. SOURCE	g. EVENT DATE	
h. PURPOSE		

**5. THE ATTACHED MATERIAL IS FORWARDED FOR REVIEW AND COMMENT IN ACCORDANCE WITH THE FOLLOWING GUIDELINES. QUESTIONS CONCERNING THIS CASE SHOULD BE DIRECTED TO:**

**A REPLY IS REQUESTED BY:**

**6. SECURITY REVIEW COORDINATION OFFICE ACTION**  
 TO: Directorate for Freedom of Information and Security Review (DFOISR) Room 2C7, 7  
 Review by this office in accordance with the guidelines below results in the following recommendation concerning clearance for publication. (X one)

NO OBJECTION AS RECEIVED.

NO OBJECTION SUBJECT TO AMENDMENTS MADE BY THIS OFFICE. Amendments and rationale (security and policy) are annotated on page numbers listed below:

OBJECTION. Amendments to permit publication are impracticable. Reasons are noted below. (Attach continuation pages if necessary.)

a. TYPED NAME	b. TITLE	c. ORGANIZATION
d. SIGNATURE		DATE

**INSTRUCTIONS**

The policy of the Department of Defense is to authorize and encourage the public release of information concerning the Department of Defense consistent with security requirements, and other exemptions to disclosure under the Freedom of Information Act.

**SECURITY** - Reviewing agencies should identify information known to be classified within the meaning of Executive Order 12958 (DoD Regulation 5200.1R) or information which in the judgment of the reviewing agency warrants classification. In the latter case, it is requested that reasons for this judgment be given and recommendations made for appropriate classification.

**POLICY** - Material originating within the Department of Defense for public release should, in addition, be reviewed for conflict with established policies and programs of the Department of Defense or those of the Federal government. If change is necessary, reviewing agencies are requested to recommend acceptable substitute language where practicable, or specify needed changes in sufficient detail to permit acceptable revision.

**EDITORIAL** - Editorial review is not a responsibility of the Directorate for Freedom of Information and Security Review and reviewing agencies should not make editorial corrections. However, obvious errors of fact should be indicated.

1. NAME (Last, First, Middle Initial)		GRADE	AGENCY
I CERTIFY THAT I HAVE (read) (been briefed) AND FULLY UNDERSTAND THE STANDARD OPERATING PROCEDURES FOR HANDLING (Cosmic) (NATO Classified) MATERIAL AND AM AWARE OF MY RESPONSIBILITY FOR SAFEGUARDING SUCH INFORMATION AND THAT I AM LIABLE TO PROSECUTION UNDER SECTIONS 793 AND 794 OF TITLE 18, U.S.C., IF EITHER BY INTENT OR NEGLIGENCE I ALLOW IT TO PASS INTO UNAUTHORIZED HANDS.			
DATE	SIGNATURE		
ROOM NUMBER	TELEPHONE	BUILDING	
DATE	VERIFIED BY (Signature of Control Officer)		

SD Form 401, JAN 63

COSMIC BRIEFING CERTIFICATE



NAME		DATE	
ADDRESS		TEL. NO.	
DOB		HEIGHT	WEIGHT
POB		EYES	HAIR
SEX	NATIONALITY	OTHER	
REMARKS	<input type="checkbox"/> INTERVIEW	<input type="checkbox"/> LETTER	<input type="checkbox"/> PHONE
		<input type="checkbox"/> OTHER	<input type="checkbox"/> OVER

SD FORM 415, AUG 81

THREAT AND CRANK DATA



**REMARKS (Continued)**

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**REFERENCES**

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**ACTION TAKEN**

\*THESE DATA ELEMENTS MUST BE FILLED IN

328\*

CLASSIFICATION \_\_\_\_\_  U  
 (CHECK BOX IF UNCLASSIFIED)

MODIFICATION				
RA	<input type="checkbox"/> A	<input type="checkbox"/> D	<input type="checkbox"/> C	<input type="checkbox"/> X
	ADD	DELETE	CHANGE	DELETE BY DATE
AMEND	<input type="checkbox"/> A	<input type="checkbox"/> D	<input type="checkbox"/> C	<input type="checkbox"/> X

REPORT OF EXCEPTION TO NDP

RA NUMBER		RA DATE				CASE NO.	SPONSOR				EXP DATE			NDP	
YEAR	MO	DA	HR	MIN	AGENCY		OFFICE	YR	MO	DA	CAT	CLS			
301*	302*	303*			30	305*	306	315*			307*	308*			
RA TYPE		RA STATUS				LOCAL USE									
309*		310*				313									
<input type="checkbox"/> C	<input type="checkbox"/> 1	<input type="checkbox"/> A	<input type="checkbox"/> D	<input type="checkbox"/> X	<input type="checkbox"/> W										
COUNTRIES															
311*															
SHORT TITLE															
312*															
SUMMARY OF EXCEPTION											65				
335*															
REPORT OF AMENDMENT															
AMEND NUMBER		AMEND DATE			CASE NO.	SPONSOR				EXP DATE			AMEND CANCELLATION		
YEAR	MO	DA	HR	MIN		AGENCY	OFFICE	YR	MO	DA					
340*	341*				342	343*	344	345			346	<input type="checkbox"/> C			
SUMMARY OF AMENDMENT											65				
355*															
328*															
CLASSIFICATION _____ <input type="checkbox"/> U (CHECK BOX IF UNCLASSIFIED)															



**DEPARTMENT OF DEFENSE  
OFFICE OF FREEDOM OF INFORMATION  
AND SECURITY REVIEW**

**Control Number and Date:**

**Action Assigned to:**

# **FREEDOM OF INFORMATION ACTION**

**Under Provisions of the FREEDOM OF INFORMATION ACT (5 U.S.C. § 552) and DoD Regulation 5400.7-R, respond no later than:**

## ***READ AND FOLLOW THESE SPECIAL INSTRUCTIONS***

- 1. Handle this material as a package. Do not section or allow the package to become separated from this cover.**
- 2. Read the attached FOIA Explanation of Exemptions sheet and, if applicable, the Classified Information Withholding Criteria sheet. Complete and return the enclosed SD Form 472 and DD Form 2086, along with the SD Form 466 and any related documents to this office for processing. Attach additional instructions, if necessary. If there is anything you do not fully understand or need clarified, contact:**
- 3. When this action is completed, place in distribution or deliver to the Pentagon OSD Mailroom (Room 3A948). For further assistance, call (703) 696-4689.**

Control Number and Date:

Action Assigned to:



# MANDATORY DECLASSIFICATION REVIEW ACTION

Under Provisions of  
Executive Order 12958  
and DoD Directive 5200.1 and 5200.1-R

Respond no later than:

**READ AND FOLLOW SPECIAL INSTRUCTIONS OF DOD REGULATION 5200.1R**

1. Handle this material as a package. Do not break it up or allow it to become separated from this cover.
2. Read the "Important Note to Reviewers" and complete the SD Form 472, "Request Information Sheet." If there is anything you do not fully understand or need clarified, phone the DIRECTORATE FOR FREEDOM OF INFORMATION AND SECURITY REVIEW ACTION OFFICER AT THE EXTENSION PROVIDED:
3. When complete, do not place in Distribution Courier Service. Call for pickup or deliver directly to Room 2C757.

## MANDATORY DECLASSIFICATION REVIEW GUIDELINES

1. If this document is under your classification jurisdiction and can be declassified, declassify in accordance with DoD 5200.1-R.
2. If the document was originated by another agency and you do not object to its declassification, mark "No objection" on SD Form 472, Request Information Sheet (Item 9a).
3. If this document is under your classification jurisdiction and cannot be declassified, or if you object to its declassification when under the jurisdiction of another office:
  - a. State reasons why document should retain classification and which of the classification criteria contained in DoD 5200.1-R or EO 12958 apply (SD Form 472, Item 11).
  - b. Determinations to retain classification shall be approved by the appropriate classification authority.
4. If the document can be declassified, but information should be withheld under one or more of the nonsecurity exemptions to mandatory disclosure under the Freedom of Information Act, i.e., FOIA exemptions 2-9, coordinate with the General Counsel. NOTE: FOIA exemptions should be invoked only on rare occasions. Contact the action officer.
5. Complete Request Information Sheet, SD Form 472.
6. Return completed action to DFOISR (Room 2C757), Pentagon.

**PLEASE NOTE:** Suspense dates are assigned to permit 45 working days for total processing of MDR requests. Your response earlier than assigned suspense date is desired, especially when classification/declassification issues are clear and uncomplicated.

### SUSPENSE SLIP

<b>CLASS:</b>	<b>BASIC DATA</b>	<b>TASKING DATE:</b>	<b>CONTROL NO.</b>
<b>FILE NO.</b>		<b>CASE</b>	<b>SUSPENSE</b>
<b>SUMMARY</b>			<b>WHHSE</b>
			<b>OSD</b>
			<b>HA</b>

<b>ROUTING: ACTION AGENCIES</b>				<b>ROUTING: INFORMATION AGENCIES</b>			

**AGENCY ROUTING:**                      1.                      2.                      3.                      4.

	<b>PREPARE</b>	<b>MEMO FOR</b>	<b>WITH COPY TO</b>
	<b>PREPARE</b>	<b>REPLY FOR SIGNATURE OF</b>	
	<b>DIRECT REPLY TO</b>		<b>WITH COPY TO</b>
	<b>COORDINATE WITH</b>		
	<b>APPROPRIATE ACTION</b>	<b>ADVANCE COPY</b>	<b>INFORMATION</b> <b>HAS ACTION</b>

**REMARKS**

<b>TASKING OFFICIAL</b>	<b>TELEPHONE NO.</b>
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**SD FORM 511**  
**83 JUL**

REPLACES DAS FORM 77, 1 OCT 79, WHICH MAY BE USED UNTIL EXHAUSTED.

*Control No. must be shown on copy  
of reply furnished tasking official*

**SUSPENSE SLIP WILL REMAIN WITH CORRESPONDENCE**

U.S. GOVERNMENT PRINTING OFFICE: 1984-42-219



**GIFT AGREEMENT**

**PRIVACY ACT STATEMENT**

**AUTHORITY:** 10 U.S.C. 113; DoD Directive 5110.4; and OSD Administrative Instruction 103.

**PRINCIPAL PURPOSE(S):** To provide a record of donations and contributions of historical properties to DoD/OSD/Historical Artifacts Collection. To enable DoD to establish title to the property. To provide the donor or the donor's heirs information concerning the status/location of the donation.

**ROUTINE USE(S):** Information may be disclosed to a municipal corporation, a soldiers' monument association, a state museum, an incorporated museum or exhibition operated and maintained for educational purposes only; a post of the Veterans of Foreign Wars or the American Legion; other recognized veterans' groups; or other Federal museums upon donation or transfer of the historical property to one of those organizations. Information may also be disclosed to Federal, State, or local taxing authorities.

**DISCLOSURE:** Voluntary, however, failure to provide complete information may result in the refusal of your gift or donation.

**DEPARTMENT OF DEFENSE (DoD) - OFFICE OF SECRETARY OF DEFENSE (OSD) UNCONDITIONAL GIFT DONATION**

I, (Print Name) \_\_\_\_\_, (Street Address) \_\_\_\_\_,  
(City) \_\_\_\_\_, (State) \_\_\_\_\_.

own the item(s) described below and have full legal authority to dispose of them.

I hereby give unconditionally the described property to the Department of Defense (DoD). I understand that \_\_\_\_\_, of the \_\_\_\_\_, located at \_\_\_\_\_ will accept the unconditional gift on behalf of the DoD.

To carry out our purpose, I do hereby give, transfer, convey, and assign said property, free and clear of all encumbrances, to the DoD, hereby relinquishing for myself, my executors, administrators, heirs, and assigns, all ownership, title, interest, and possession therein to the donee absolutely.

The herein described gift and transfer of said property does not entail the granting of special concessions or privileges to me, my executors, administrators, heirs and assigns. The herein described gift and transfer of said property is made for the benefit or use in connection with the establishment, operation, or maintenance of an OSD or other institution or organization under the jurisdiction of the Department of Defense, in conformance with Section 2601 of Title 10, United States Code.

I also understand that museum record-keeping procedures require that my name and address be kept on file, and I hereby acknowledge that I do not consider this to be an invasion of my privacy.

I understand it is my responsibility to have an appraisal of the donated property made for tax purposes. No appraisals will be performed by the \_\_\_\_\_ as a facility or members of the staff as individuals.

**DESCRIPTION OF PROPERTY (Continue on separate sheet if necessary):**

DONOR SIGNATURE

DATE

RECEIVED BY (OSD Representative Name, Title, and Signature)