

RADIOLOGICAL RESPONSE CAPABILITY REPORT

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| 1. REPORTING ORGANIZATION | 3. CITY | 5. ZIP/APO/FPO | 7. DATE PREPARED (YYYYMMDD) |
| 2. INSTALLATION/SHIP | 4. STATE/COUNTRY | 6. MAJOR COMMAND | |
| INSTRUCTIONS: Items with asterisk (*), mark "X" to indicate capability even if only partial. All others indicate number available. Report Unique Response Capability not covered below in Remarks on back. | | | |
| 8. ALPHA SURVEY METER | | 18. OTHER SURVEY DEVICES (*) <i>(Specify type in Remarks)</i> | 27. PHYSICAL SECURITY FORCES (*) |
| 9. MULTIFUNCTION RATEMETERS (*) | | | 28. PUBLIC AFFAIRS SPECIALISTS (*) |
| 10. ALPHA-BETA-GAMMA SURVEY METERS | | 19. EOD CAPABILITY (*) | 29. LEGAL REPRESENTATIVES (*) |
| 11. BETA/GAMMA SURVEY METERS | | 20. FIRE FIGHTING CAPABILITY (*) | 30. MEDICAL PERSONNEL (*) |
| 12. GAMMA SURVEY METERS | | 21. DECONTAMINATION CAPABILITY | 31. MEDICAL PERSONNEL (RADIOLOGICALLY TRAINED) (*) |
| 13. NEUTRON SURVEY METERS | | 22. PHOTOGRAPHIC CAPABILITY (*) | 32. HEALTH PHYSICISTS (*) |
| 14. X-RAY METERS | | 23. AERIAL SURVEY CAPABILITY (*) | 33. REACTOR SPECIALISTS (*) |
| 15. PROBES | | 24. FIXED WING AIRCRAFT (*) | 34. WEAPON DESIGN SPECIALISTS (*) |
| 16. TRITIUM MONITORING CAPABILITY | | 25. ROTARY WING AIRCRAFT (*) | 35. METEOROLOGICAL PERSONNEL (*) |
| 17. DOSIMETERS (*) | | 26. SELF-CONTAINED BREATHING APPARATUS (SCBA) (*) | 36. SECURE COMMUNICATIONS (*) |
| 37. DUTY NUMBER COMMERCIAL PREFIX: DSN PREFIX: | | 38. EMERGENCY NUMBER COMMERCIAL PREFIX: DSN PREFIX: | 39. FAX MACHINE EXTENSION UNCLASSIFIED FAX: CLASSIFIED FAX: |

DD FORM 2325, OCT 2002

PREVIOUS EDITION IS OBSOLETE.

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| 40. REMARKS | |
| 41. POINT OF CONTACT (MUST be completed) | |
| a. NAME OF PERSON SUBMITTING REPORT (Last, First, Middle Initial) | b. ORGANIZATION |
| c. OFFICE SYMBOL OR DELIVERY CODE | d. TELEPHONE NUMBER (Specify DSN or Commercial) |
| e. AUTODIN MESSAGE PLAIN LANGUAGE ADDRESS (PLA) (To include office symbol or code) (As outlined in USMCEB Pub. No.) | |
| f. AUTODIN ROUTING INDICATOR | |
| g. ORGANIZATION MAILING ADDRESS (Include ZIP Code) | |
| h. ORGANIZATION E-MAIL ADDRESS | |

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