

[illegible]

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)			
ASD (Reserve Affairs)			
Inspector General, Department of Defense		TYPE OF ACTION REQUIRED	
		Preparation of DoD Report	1
		Advise If Any Objections	2
		Comments and Recommendations	3
		Information	4
		Information, Pending Submission of Proposed Report	5
		Implementation	6
		Appropriate Action	7
		OTHER (Specify)	8
Director, Operational Test and Evaluation			
Director, Program Analysis and Evaluation			
Deputy Assistant Secretary of Defense (Administration), OASD (Comptroller)			
Director, Defense Advanced Research Projects Agency			
Director, Defense Audiovisual Agency			
Director, Defense Communications Agency ATTN: Counsel			
Director, Defense Contract Audit Agency ATTN: Counsel			
Director, Defense Intelligence Agency ATTN: Counsel			
Director, Defense Investigative Service			
		ADDRESS REPLY TO: 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	
4. DESCRIPTION			
a. TYPE OF DOCUMENT		b. NUMBER OF PAGES	
		c. CLASSIFICATION	
d. SUBJECT		e. REQUESTOR	
f. SOURCE		g. EVENT DATE	
h. PURPOSE			
<p>5. THE ATTACHED MATERIAL IS FORWARDED FOR REVIEW AND COMMENT IN ACCORDANCE WITH THE FOLLOWING GUIDELINES. QUESTIONS CONCERNING THIS CASE SHOULD BE DIRECTED TO:</p> <p>A REPLY IS REQUESTED BY:</p>			
<p>6. SECURITY REVIEW COORDINATION OFFICE ACTION</p> <p>TO: Directorate for Freedom of Information and Security Review (DFOISR) Room 2C7, 7</p> <p>Review by this office in accordance with the guidelines below results in the following recommendation concerning clearance for publication: <i>(X one)</i></p> <div style="margin-top: 10px;"> <input type="checkbox"/> NO OBJECTION AS RECEIVED. </div> <div style="margin-top: 10px;"> <input type="checkbox"/> NO OBJECTION SUBJECT TO AMENDMENTS MADE BY THIS OFFICE. Amendments and rationale (security and policy) are annotated on page numbers listed below. </div> <div style="margin-top: 10px;"> <input type="checkbox"/> OBJECTION. Amendments to permit publication are impracticable. Reasons are noted below. <i>(Attach continuation pages if necessary.)</i> </div>			
a. TYPED NAME		b. TITLE	
		c. ORGANIZATION	
d. SIGNATURE		e. DATE	
<p align="center">INSTRUCTIONS</p> <p>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.</p> <p>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.</p> <p>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.</p> <p>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.</p>			

NAME (Last, First, Middle Initial)		GRADE	AGENCY
I CERTIFY THAT I HAVE (read) (been briefed) AND FULLY UNDERSTAND THE STARTING OPERATING PROCEDURES FOR HANDLING (Cosmic) (NATO Classi- fied) 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 NEGLI- GENCE 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

**DIRECTORATE FOR FREEDOM OF INFORMATION AND SECURITY REVIEW (DFOISR)
REVIEWER'S WORKSHEET**

1. ACTION DIVISION		2. CASE NO.	3. DATE RECEIVED	
4. DESCRIPTION				
a. TYPE OF DOCUMENT		b. NUMBER OF PAGES	c. CLASSIFICATION	
d. SUBJECT		e. REQUESTOR		
f. SOURCE			g. EVENT DATE	
h. PURPOSE				
5. ACTION OFFICER				
6. WORKSHEET				
a. AGENCY NAME	b. ROUTED DATE	c. DUE DATE	d. ACTION TAKEN	e. REMARKS
7. COMMENTS <i>(Attach continuation sheets if necessary)</i>				
8. DFOISR ACTION				
a. RECOMMENDED ACTION <i>(X as applicable)</i>			b. FINAL ACTION <i>(X as applicable)</i>	
<input type="checkbox"/> CLEARED			<input type="checkbox"/> CLEARED	
<input type="checkbox"/> CLEARED AS AMENDED			<input type="checkbox"/> CLEARED AS AMENDED	
<input type="checkbox"/> NOT CLEARED			<input type="checkbox"/> NOT CLEARED	
<input type="checkbox"/> SEE MEMO ATTACHED			<input type="checkbox"/> SEE MEMO ATTACHED	
(1) INITIALS	(2) DATE	(1) INITIALS	(2) DATE	
9. CASE SHOULD BE INDEXED UNDER THE FOLLOWING KEYWORDS				

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)

REFERENCES

ACTION TAKEN

328*



(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 RECORD
AMEND	<input type="checkbox"/> A	<input type="checkbox"/> D	<input type="checkbox"/> C	<input type="checkbox"/> X

REPORT OF EXCEPTION TO NDP

[illegible]



**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.**

SUSPENSE SLIP

CLASS:	BASIC DATE:	TASKING DATE:	CONTROL NO.
FILE NO.		CASE	SUSPENSE
SUMMARY		WHHSE	
		OSD	
		HA	

ROUTING: ACTION AGENCIES				ROUTING: INFORMATION AGENCIES			
1.	2.	3.	4.				

AGENCY ROUTING:	1.	2.	3.	4.
PREPARE		MEMO FOR		WITH COPY TO
PREPARE		REPLY FOR SIGNATURE OF		WITH COPY TO
DIRECT REPLY TO				
COORDINATE WITH				
APPROPRIATE ACTION		ADVANCE COPY	INFORMATION	HAS ACTION

REMARKS

TASKING OFFICIAL	TELEPHONE NO.
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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

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)

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.