

REQUEST FOR PUBLISHING

For use of this form, see AR 25-30; the proponent agency is OAASA.

1. DATE (YYYYMMDD)

PART I - COMPLETED BY ORIGINATING AGENCY

2. TO: (Include ZIP Code)	3. FROM: (Originating Agency)	5a. TYPE OF PUBLICATION
		5b. NOMENCLATURE
	4a. PERSON TO CONTACT	5c. TYPE OF ACTION <input type="checkbox"/> NEW <input type="checkbox"/> REVISION <input type="checkbox"/> CHANGE (Enter Change No.): _____ <input type="checkbox"/> CERTIFY CURRENT <input type="checkbox"/> RESCIND
	4b. TELEPHONE NO. DSN NO.	
4c. FAX NUMBER		
4d. E-MAIL ADDRESS		

5d. IS PUBLICATION CLASSIFIED? <input type="checkbox"/> YES <input type="checkbox"/> NO	5e. IS TITLE OF PUBLICATION CLASSIFIED? <input type="checkbox"/> YES (If yes, enter unclassified title for index) <input type="checkbox"/> NO
--	--

5f. TITLE OF PUBLICATION

5g. IS THERE ANY PERSONALLY IDENTIFIABLE INFO (PII) IN THIS PUBLICATION OR ON ANY ADDRESS LABELS? YES NO

5h. MULTI-SERVICE PUBLICATION MARINES COAST GUARD
 YES NO NAVY DLA
If Yes, check service and list nomenclature AIR FORCE OTHER

5i. PRODUCT DATE (YYYYMMDD)	5j. REQUESTED PUB DATE (YYYYMMDD)	5k. EFFECTIVE DATE (YYYYMMDD)	5l. EXPIRATION DATE (YYYYMMDD)
-----------------------------	-----------------------------------	-------------------------------	--------------------------------

5m. COMPLETION DATE (YYYYMMDD)	5n. ADVANCE PIN (If Applicable)	5o. ADVANCE AUTHENTICATION (If Applicable)	6a. REQUIRED FOR MOBILIZATION? <input type="checkbox"/> YES <input type="checkbox"/> NO
--------------------------------	---------------------------------	--	--

6b. IS THIS PUBLICATION INTENDED FOR DISTRIBUTION A: YES NO DISTRIBUTION B: YES NO

7. JUSTIFICATION *Indicate why publication is needed, such as statutory requirement, DOD Directive, etc., REQUIRED STATEMENTS/CLEARANCES, INFORMATION, AND SPECIAL REQUESTS.*

8a. MANUSCRIPT INCLUDES: (if applicable) <input type="checkbox"/> APPIP TEMPLATE FORMAT <input type="checkbox"/> APT-D <input type="checkbox"/> TABLES <input type="checkbox"/> WORD <input type="checkbox"/> GRAPHICS <input type="checkbox"/> DD FORM(S) 67 <input type="checkbox"/> DA FORM 2028	8b. DOCUMENT/PRODUCT INCLUDED? (if "NO", explain) <input type="checkbox"/> YES <input type="checkbox"/> NO
---	--

9a. RELATED PUBS:

9b. SUPERSEDED DA PUBS:

9c. RESCINDED DA PUBS:

9d. FORMS AFFECTED: NUMBER OF NEW FORMS: NUMBER OF REVISED FORMS: NUMBER OF RESCINDED FORMS:
OF WHICH, HOW MANY COLLECT SSN: OF WHICH, HOW MANY COLLECT SSN:

10a. IS COPYRIGHT MATERIAL INCLUDED IN MANUSCRIPT? <small>(If "YES" copy of copyright release must be attached)</small> <input type="checkbox"/> YES <input type="checkbox"/> NO	10b. COPYRIGHT HELD BY <i>(Name and address, include ZIP Code, of copyright owner)</i>
--	--

11. DISTRIBUTION RESTRICTION

11a. DISTRIBUTION RESTRICTION <i>(Publication contains material that would restrict distribution)</i> (If "YES", select from list) <input type="checkbox"/> NO <input type="checkbox"/> YES	11b. SALE BY SUPERINTENDENT OF DOCUMENTS <input type="checkbox"/> NOT TO BE SOLD <input type="checkbox"/> MAY BE SOLD
---	---

11c. DISTRIBUTION MEDIA <i>(All Army-wide administrative publications will be Electronic Media Only (EMO) unless classified, FOUO, or distribution restricted)</i> <input type="checkbox"/> PAPER <input type="checkbox"/> CD ROM <input type="checkbox"/> WEB <input type="checkbox"/> DVD <input type="checkbox"/> OTHER	11d. WAIVER TO PRINT IN PAPER ATTACHED? <input type="checkbox"/> YES <input type="checkbox"/> NO
---	--

12. COORDINATION Use Part XI *(Continuation/Remarks)* of this form for additional coordination, if necessary, or attached list. WAIVER FOR COORDINATION ATTACHED

12a. AGENCY/ACOM/ASCC/DRU <i>(List formal name)</i>	12b. NAME OF REVIEWING OFFICIAL	12c. OFFICE SYMBOL	12d. TELEPHONE NO.	12e. DATE <i>(YYYYMMDD)</i>

PART II - AGENCY HEAD APPROVAL

13. ALL OFFICE OF THE JUDGE ADVOCATE GENERAL (OTJAG) COMMENTS HAVE BEEN INCORPORATED OR ADDRESSED? YES NO (If "NO", Explain)

13a. TYPED NAME OF AGENCY HEAD (<i>Deputy, Director, or Division Chief</i>)	13b. GRADE	13c. SIGNATURE	13d. DATE (YYYYMMDD)
---	------------	----------------	----------------------

14. THIS PUBLICATION DOES NOT UNNECESSARILY DUPLICATE EXISTING PUBLICATIONS AND IS ESSENTIAL TO THE EFFECTIVE, EFFICIENT, AND ECONOMICAL CONDUCT OF OFFICIAL BUSINESS.

14a. TYPED NAME OF AGENCY HEAD	14b. GRADE	14c. SIGNATURE OF AGENCY HEAD	14d. DATE (YYYYMMDD)
--------------------------------	------------	-------------------------------	----------------------

PART III - REQUIREMENT CONTROL ACTION

15. REQUIREMENT CONTROL SYMBOL (RCS) REQUIRED BY AR 335-15? YES IF "YES", ASSIGNED RCS: NO

15a. TYPED NAME OF RCS OFFICER	15b. GRADE	15c. SIGNATURE	15d. DATE (YYYYMMDD)
--------------------------------	------------	----------------	----------------------

PART IV - FEDERAL REGISTRY

16a. NAME	16b. GRADE	16c. SIGNATURE	16d. DATE (YYYYMMDD)
-----------	------------	----------------	----------------------

PART V - DA COMMITTEE MANAGER

17a. NAME	17b. GRADE	17c. SIGNATURE	17d. DATE (YYYYMMDD)
-----------	------------	----------------	----------------------

PART VI - PUBLICATION CONTROL ACTION

18. APPROVED IN ACCORDANCE WITH AR 25-30. YES NO

18a. MIPR NO./ FUND CITE (*As appropriate*)

18b. TYPED NAME OF PUBLICATION CONTROL OFFICER	18c. GRADE	18d. SIGNATURE	18e. DATE (YYYYMMDD)
--	------------	----------------	----------------------

PART VII - REDUCTION IN UNIT PUBLICATIONS PROGRAM ACTION

19a. NAME	19b. GRADE	19c. SIGNATURE	19d. DATE (YYYYMMDD)
-----------	------------	----------------	----------------------

PART VIII - APPROVING AUTHORITY FOR SPECIAL HANDLING (*GO/SES required for special, PII, and non-standard requests*)

20a. NAME	20b. GRADE	20c. SIGNATURE	20d. DATE (YYYYMMDD)
-----------	------------	----------------	----------------------

PART IX - SPECIAL AND RECOMMENDED DISTRIBUTION

21. SPECIAL DISTRIBUTION (*Complete separately and attach.*)

INITIAL DISTRIBUTION NUMBER (*If applicable*)

PART X - PRINTING SPECIFICATIONS

22a. NUMBER OF TEXT PAGES	22b. TEXT STOCK	22c. COVER PAGES
22d. COVER STOCK	22e. NUMBER OF FOLD-INS	22f. PRINTS
22g. FOLD-IN STOCK	22h. TOTAL NUMBER OF PAGES TO PRINT (<i>including blanks, cover and fold-ins</i>)	22i. COLOR OF INK
22j. TRIM SIZE	22k. BINDING	22l. NUMBER OF STAPLES
22m. SIDES TO BE TRIMMED	22n. TYPE OF PUBLICATION COVER	
22o. DRILL		

PART XI - REMARKS/CONTINUATION

23. REMARKS:

PART - XI REMARKS/CONTINUATION *(continued)*

23. REMARKS: *(continued)*

PART XII - ARMY PUBLISHING DIRECTORATE (APD)

24a. NAME

24b. GRADE

24c. SIGNATURE

24d. DATE (YYYYMMDD)