

**CLASSIFIED DOCUMENT ACCOUNTABILITY RECORD**

DATE

For use of this form, see AR 380-5; the proponent agency is the Office, Assistant Chief of Staff for Intelligence.

**SECTION A - GENERAL**

TO:		FROM:			
DATE RECEIVED	ACTION OFFICE(S)	SUSPENSE DATE(S)		REGISTER OR CONTROL NO.	
CONTROL LOG OR FILE NO.	CLASSIFICATION	NUMBER OF COPIES	DESCRIPTION (Type, File Ref., Unclassified Subject or Short Title and Number of Indorsements/Incls)	DATE OF DOCUMENT	ORIGINATOR
CL-007-83	S/NOFORN	1	Cy 1 of 2, Report CL-987/8210/01 W/1 EXHIBIT..... .....NOTHING FOLLOWS.....		

**SECTION B - ROUTING**

TO	COPY NO.	DATE	ACKNOWLEDGE RECEIPT OF THE MATERIAL DESCRIBED HEREON	
			PRINTED NAME	SIGNATURE
1.				
2.				
3.				
4.				
5.				

**SECTION C - DESTRUCTION CERTIFICATE** (Check appropriate block)

MATERIAL DESCRIBED HEREON HAS BEEN:			PAGE OR COPY NO.
<input type="checkbox"/> DESTROYED	<input type="checkbox"/> TORN IN HALF AND PLACED IN A CLASSIFIED WASTE CONTAINER (AR 380-5)		
OFFICE SYMBOL	DATE	PRINTED NAME OF CUSTODIAN OR REP	SIGNATURE
DESTRUCTION RECORD NO.	DATE	PRINTED NAME OF CERTIFYING/DESTR. OFF.	SIGNATURE
PAGE OR COPY NUMBER	DATE	PRINTED NAME OF WITNESSING OFFICIAL	SIGNATURE

**SECTION D - REPRODUCTION AUTHORITY**

NUMBER OF COPIES TO BE REPRODUCED	AUTHORIZED BY	DATE
-----------------------------------	---------------	------

**SECTION E - RECEIPT/TRACER ACTION** (Check appropriate block)

<input type="checkbox"/> RECEIPT OF DOCUMENT(S) ACKNOWLEDGED	<input type="checkbox"/> DOCUMENT(S) HAVE NOT BEEN RECEIVED	
<input type="checkbox"/> TRACER ACTION: SIGNED RECEIPT FOR MATERIAL DESCRIBED ABOVE HAS NOT BEEN RECEIVED.		
DATE	PRINTED NAME, GRADE OR TITLE	SIGNATURE

COMMENTS