

Classification

Approved For Release 2006/09/25 : CIA-RDP75-00399R000100120139-1

601180640

DDS/OL/SD 81

REPORTS INVENTORY

XXXXXXX

PREPARE IN DUPLICATE

1. TITLE OF REPORT (if a fill-in report include Form No.)

Selected Property In Use Account CMR's

2. TYPE OF REPORT X STATISTICAL NARRATIVE MACHINE-NAME LISTING

3. FUNCTIONAL AREA PERSONNEL LOGISTICS TRAINING SECURITY MEDICAL FINANCE

ADMIN. GENERAL OTHER (specify)

4. NO. OF COPIES PREPARED See #5

5. FREQUENCY (weekly, monthly, quarterly, etc.) Monthly through cycle of 155 Accounts

6. DISTRIBUTION (No. of components not number of copies) 1

7. FORMAT (memorandum, form computer print-out, etc) Computer Print-Out

8. ADP PROCESSING X YES IF YES GIVE ADP PROCESSING NO. 223

9. DIRECTIVE AUTHORITY REQUIRING REPORT

10. PREPARING COMPONENT (include lowest level contributing information to report) OCS, OL/SD/FSB

11. FEEDER REPORTS (State total number and identify by Title, Form No., or nomenclature. Attach separate sheet if necessary.)

12. COST FACTORS

A. MANUAL PREPARATION AND REVIEW COSTS

Table with 6 columns: GRADE, HOURLY RATE, HOURS PER REPORT, COST PER REPORT, TIMES PREPARED, COST PER YEAR. Row 1: GS-6, 3.51, 2, 7.02, 155, 1,088.10

B. COSTS OF COMPUTER PRODUCED REPORTS

Table with 6 columns: GRADE, HOURLY RATE, HOURS PER REPORT, COST PER REPORT, TIMES PREPARED, COST PER YEAR. Row 1: (blank), (blank), (blank), 2.25, 155, 348.75

TOTAL COSTS PER YEAR 1,436.85

13. COMPLETE DETAILED JUSTIFICATION FOR THIS REPORT (in addition to directive or authority cited in item 9). IF KNOWN, INCLUDE DATE REPORT WAS FIRST STARTED AND COMPONENT WHO ESTABLISHED REQUIREMENT.

This is the document used by the Responsible Officer (R/O) of each account to conduct his annual inventory and used jointly by the R/O and Headquarters to correct and update the account.

14. FUTURE GOALS

Table with 2 main sections: GOAL PROPOSED BY COMPONENT FOR THIS REPORT (RETAIN AS IS, CHANGE, DISCONTINUE) and ESTIMATED SAVINGS (MAN-HOURS, DOLLARS STAT)

16. DATE OF INVENTORY 5 Oct 1970

17. NAME AND TITLE OF PERSON FURNISHING INFORMATION

18. EXTENSION

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