



DEPARTMENT OF THE ARMY
UNITED STATES ARMY COMBINED ARMS SUPPORT COMMAND
2221 ADAMS AVENUE
FORT LEE VIRGINIA 23801-2102

ATCL-CS

CASCOM POLICY 18-10
30 JULY 2018

MEMORANDUM FOR SEE DISTRIBUTION

SUBJECT: United States Army Combined Arms Support Command (CASCOM)
Secretary to the General Staff (SGS) Administrative Actions Policy

1. **Purpose:** This policy provides guidance and procedures for routing actions and correspondence through SGS to the CASCOM Command Group (CMD GRP).
2. **Scope:** All actions and correspondence requiring review/approval by the CASCOM CMD GRP will comply with these procedures. Any action requiring the Commanding General's signature is subject to a legal review.
3. **Submission Procedures:**
 - a. Actions and correspondence that can be digitally signed will be submitted to the SGS mailbox **USARMY Ft Lee TRADOC Mailbox Lee-CASCOM-SGS**.
 - b. Actions and correspondence that do not require a digital signature will be submitted in hardcopy format to the SGS and a digital version will be emailed to the SGS mailbox.
 - c. Hard copy actions and correspondence will be placed in a two pocket folder with a copy of the DA Form 5 (Encl 1) affixed to the front of the folder. Only one action per folder. The DA Form 5 should be affixed over other routing sheets in such a manner so that when lifted, the previous list can be viewed by command group personnel. It is highly recommended (but not required) that all actions are accompanied by a DA Form 200 (Encl 2) and signed by the recipient as proof of delivery to the SGS. DA Form 200 should be maintained until the action is completed.
 - d. DA Form 5 must be filled out as completely as possible to expedite the action. A complete summary will be described in the Discussion section of the DA Form 5.

4. **Processing Procedures:**

- a. Upon receipt, actions and correspondences will be logged into the SGS SharePoint database and assigned a tracking number for quick inquiries and tracking purpose.

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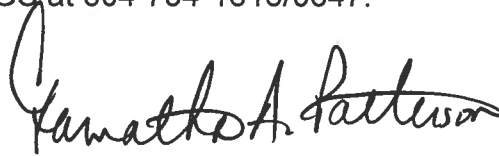
b. All actions will be reviewed for Quality Assurance/Quality Control prior to forwarding to the CMD GRP. Incomplete actions or actions requiring correction will be returned immediately to the originating action officer by SGS personnel. The name and contact number of the individual receiving the action will be entered into the SGS share point database. The original DA Form 5 is not to be removed.

c. For all actions requiring CMD GRP review or endorsement, allow 7 to 10 business days for completion. If an action needs to be expedited, provide justification on the DA Form 5, with a proposed suspense date.

d. For routine actions, please allow a minimum of five business days before submitting a status inquiry. This does not apply to actions with a short suspense date. Updates on actions with a short suspense can be made daily.

e. Upon completion of review by the CMD GRP, SGS will close the action or correspondence in the database and place it in distribution for delivery to the originating action officer for final disposition. Action Officer will be notified via email.

5. Point of contact is the CASCOM SGS at 804-734-1616/0647.



TAMATHA A. PATTERSON
COL, GS
Chief of Staff

2 Encls
DA Form 5
DA Form 200

DISTRIBUTION:
U.S. ARMY TRANSPORTATION SCHOOL
U.S. ARMY SOLDIER SUPPORT INSTITUTE
U.S. ARMY ORDNANCE SCHOOL
U.S. ARMY QUARTERMASTER SCHOOL
U.S. ARMY LOGISTICS UNIVERSITY
FORT LEE GARRISON
HHC CASCOM

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(FOUO)

ARMY STAFFING FORM For use of this form, see AR 25-50; the proponent agency is AASA.			1. TRACKING NUMBER SGS will Issue Track #	2. TODAY'S DATE (YYYYMMDD) 20180711	3. SUSPENSE DATE (YYYYMMDD)
4. OFFICE SYMBOL ATCL-SGS			5. SUBJECT CG CASCOM Policies (Give a complete subject title)		
6. ROUTING:			POC	RICHARDSCH MELISSA AH <small>Identify report by RICHARDSCH MELISSA AH 1770-0000 N.1275745649</small> (Rank, Name, Phone) DIR	
	SGS	Initial	Date	COMMENTS: Point of Contact for questions and inquiries referencing action. ENCL 1	
	CSM				
	CWO				
	DCOS				
	COS				
	DCG				
	XO				
	CG				
7. EXECUTIVE SUMMARY / ACTION MEMORANDUM					
<u>Key Points</u>					
<ul style="list-style-type: none"> ■ ■ ■ 					
Ref: N/A					
Encl: TAB A: Ensure all documents within action folder are divided by TABs as stated on the DA Form 5 TAB B:					
1. Purpose: Obtain CG review and Signature on enclosed policy letters.					
2. Discussion: ** Give a complete purpose and BLUF (Bottom Line Up Front) summary of the action.					
a. Purpose of the enclosed policy letters is to direct regulation and CG guidance as stated in each letter.					
3. Recommendation: CG sign policies at each TAB enclosed.					
APPROVED _____ DISAPPROVED _____ NOTED _____ SEE ME _____ COMMENT _____					

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(FOUO)

8. LEAD AGENCY STAFF COORDINATION				TRACKING NUMBER:		
TITLE	INITIAL	TYPE OR PRINT NAME			DATE (YYYYMMDD)	
		Staffing through personnel within the section, i.e. Director, Commandant, CSM etc.				
PRINCIPAL		Head person releasing the action to be routing outside the staff section/organization				
ACTION OFFICER <i>(Name/Title/Phone Number/E-mail)</i>		Personnel to contact once action is complete				
FILE LOCATION:						
SACO's NAME <i>(Name/Title/Phone Number/E-mail)</i>						
RECOMMENDATION FOR STAFF PRINCIPAL:						
Note any comment, statements or recommendations from section leader.						
9. STAFF COORDINATION						
CONCUR	NON-CONCUR	AGENCY	NAME (TITLE, LAST NAME)	PHONE	DATE (YYYYMMDD)	REMARKS
<input type="checkbox"/>	<input type="checkbox"/>		For staffing coordination			
<input type="checkbox"/>	<input type="checkbox"/>		outside the organization			
<input type="checkbox"/>	<input type="checkbox"/>					
<input type="checkbox"/>	<input type="checkbox"/>					
<input type="checkbox"/>	<input type="checkbox"/>					
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<input type="checkbox"/>	<input type="checkbox"/>					
<input type="checkbox"/>	<input type="checkbox"/>					
10. REMARKS: <input type="checkbox"/> RETURNED REQUESTING ADDITIONAL INFORMATION/CLARIFICATION						

(FOUO)

AP

PRIVACY ACT STATEMENT
DATA REQUIRED BY THE PRIVACY ACT STATEMENT OF 1974

AUTHORITY: AR 25-50

PRINCIPAL PURPOSE(S): DA Form 5 (Army Staffing Form) is a departmental form that, when completed, provides pertinent information about the action that is being staffed for coordination and/or submitted for approval and/or signature.

ROUTINE USE(S): Information furnished will not be disclosed to agencies outside of DOD.

DISCLOSURE: Disclosure of personally identifiable information is voluntary. However, this form cannot be processed without coordination and point of contact information.

INSTRUCTIONS

PARENTHESES AT TOP OF FORM:

Fill in classification (UNCLASSIFIED, FOUO, etc.)

Block 1. TRACKING NUMBER:

If the action has been assigned a tracking number by the activity Staff Action Control Office (SACO), enter that number.

Block 2. TODAY'S DATE:

Enter today's date. The Army standard date format is YYYYMMDD. Example: 20131015.

Block 3. SUSPENSE DATE:

If the action is responding to an external suspense, enter the date of the assigned suspense. If the suspense date is established internally, enter that date.

Block 4. OFFICE SYMBOL:

Enter the office symbol of the agency responsible for the action. Example: (DAMO-FMP)

Block 5. SUBJECT:

Enter the primary subject line of the action.

Block 6. ROUTING:

The SGS will usually complete this block.

Block 7. EXECUTIVE SUMMARY/ACTION MEMORANDUM:

Key Points: The key points are the salient information that the CG and/or DCG needs to take away from the action and are written at the Senior Army Leaders' level. These are the key points your Principal or Deputy want to convey to the CG/DCG. Each key point area allows you essentially two lines to express your key point (164 spaces) with a maximum of three key points.

Ref: List all references, e.g., CSA tasker; meeting; e-mail; etc. If none, state N/A.

Encl: List all enclosures/TABs. Explain what is included within the packet. If none, state N/A (for example, Enclosures: TAB A: Memorandum for CG's signature. TAB B: CSA tasking, and so on).

1. Purpose: Provide a short and clear statement of purpose (e.g., to obtain the CG' signature on the memorandum at TAB A).

2. Discussion: Summarize the information and provide a current status if applicable. Why are you telling this to the CG/DCG? What should the CG/DCG know and discuss? Describe the task, origin of the action, issue and the requirement. Provide fact-filled background and comment. This discussion should tell the "story" on an action without "begging questions." The final approval authority should fully understand why this action is necessary.

3. Recommendation: Provide a brief statement defining the desired action by the final approval authority and explain why this is the best option (e.g., CG approve action and sign the memorandum at TAB A.) Block 7 allows the EOH member to approve, disapprove, or comment on the action.

Block 8. LEAD AGENCY STAFF COORDINATION (Lead Agency Use Only):

These blocks are designated for the internal approval chain within a Staff. Possible entries could include Branch Chief, Division Chief, Director, and Deputy. The appropriate releasing authority should electronically sign and date the action once they have released/approved for forwarding to the next appropriate office for disposition. The Command/Staff Principal will electronically sign and date. His or her electronic signature represents concurrence with the contents of the DA Form 5 and the final product to be submitted to SGS for CG/DCG review.

ACTION OFFICER (Name/Title/Phone Number/E-Mail):

Enter the responsible action officer's name, rank and/or position title, office phone number and email address. This information is especially important to ensure any questions related to the action can be quickly directed to the appropriate point of contact, avoiding delay in processing the action. Action Officer will electronically sign.

FILE LOCATION:

It is important to be able to retrieve a file for corrections and annotations in the event that the originating action officer is not available. Enter the file path to reflect where the correspondence was saved on the server in order that an alternate POC retrieve the file and make any necessary annotations. NOTE: This applies to unclassified documents only.

SACO'S NAME (Name/Title/Phone Number/E-Mail) :

Enter the responsible SACO's name, rank and/or position title, office phone number and email address. This information is especially important to ensure any questions related to the action can be quickly directed to the appropriate POC, avoiding delay in processing the action. SACO will electronically sign.

RECOMMENDATION FOR STAFF PRINCIPAL:

This block allows for recommendations to the Staff Principal (for example, DCS, G-3/5/7 approve the memorandum at TAB A by electronically initialing Block 8).

Block 9. STAFF COORDINATION:

When staffing an action for review and comment, include each office and POC information that the action is being staffed with and include instructions for the addressees to indicate their concurrence by checking the appropriate block and returning to the originator. If concurrence indicates "concur with comments," then include comments at appropriate tab.

Block 10. REMARKS BY SGS:

The SGS will complete this block.

RETURNED REQUESTING ADDITIONAL INFORMATION/CLARIFICATION:

The SGS will use this block to identify all actions being returned for additional information.

TRANSMITTAL RECORD For use of this form, see AR 25-50; the proponent agency is AASA.		1. SECURITY CLASSIFICATION	2. SHIPMENT NO.
3. TITLE/FILE IDENTIFICATION See Listing below for Actions		4. AS OF DATE (YYYYMMDD) 20180222	5. SHIPMENT DATE (YYYYMMDD)
6. AUTHORITY FOR SHIPMENT		7. NUMBER OF RECORDS TRANSMITTED	
8. PERSON TO CONTACT (Name and telephone)		9. REQUIREMENT CONTROL SYMBOL (AR 335-15)	
10. SHIPPED FROM HHC, CASCOM ATTN: S1 FORT LEE VA 23801		11. SHIPPED TO HQ, CASCOM ATTN: SGS FORT LEE VA 23801 <input checked="" type="checkbox"/> RETURN RECEIPT REQUESTED (When box is checked, sign below and return copy to sender.)	
10a. TYPED NAME AND TITLE SENDER		11a. TYPED NAME AND TITLE OF RECEIVER	
10b. SIGNATURE OF SENDER		11b. SIGNATURE OF RECEIVER AND DATE (YYYYMMDD)	
12. TYPE OF MEDIA TRANSMITTED			
<input checked="" type="checkbox"/> HARD COPY <input type="checkbox"/> PUNCHED CARDS <input type="checkbox"/> CASSETTES <input type="checkbox"/>			
<input type="checkbox"/> MICROFILM <input type="checkbox"/> PHOTO <input type="checkbox"/> FICHE <input type="checkbox"/>			
13. NUMBER OF BOXES (Packages) 3 FOLDERS		14. NUMBER OF ITEMS	
15. METHOD OF SHIPMENT			
<input type="checkbox"/> COURIER <input type="checkbox"/> FIRST CLASS <input type="checkbox"/> PARCEL POST <input type="checkbox"/>			
<input type="checkbox"/> EXPRESS MAIL <input type="checkbox"/> REGISTERED <input checked="" type="checkbox"/> Dropped Off <input type="checkbox"/>			
16. SPECIAL INSTRUCTIONS			
17. TYPE COMPONENT USED (for magnetically recorded data)			
18. REMARKS THE FOLLOWING ITEMS WERE RECEIVED: Retirement Packet for CW4 (ESD) with duty at Fort Belvoir Retirement Packet for LTC Clifton, (Experimentation and Analysis Branch) Retirement Pact for MAJ Czapla, T. TRAC-LEE			