



**DEPARTMENT OF THE ARMY**  
**US ARMY INSTALLATION MANAGEMENT COMMAND**  
**HEADQUARTERS, UNITED STATES ARMY GARRISON, FORT BELVOIR**  
**9820 FLAGLER ROAD, SUITE 213**  
**FORT BELVOIR, VIRGINIA 22060-5928**

REPLY TO  
ATTENTION OF

IMBV-HRA

18 May 2015

MEMORANDUM OF INSTRUCTION

SUBJECT: Procedures for Blank Forms and Publication Account Holders

**1. Purpose.** To provide instructions to acquire blank forms and publications and responsibilities of the units and installation publication officials.

**2. References.**

a. Publications:

- (1) AR 25-30, The Army Publishing Program, 27 March 2006.
- (2) DA Pamphlet 25-33, Users Guide for Army Publications and Forms.

b. Forms:

- (1) DA Form 12-R, Request for Establishment of a Publication Account. (SEE APPENDIX A)
- (2) DA Form 17, Requisition for Publications and Blank Forms. (SEE APPENDIX B)

**3. Responsibilities.**

a. Fort Belvoir Administrative Services Division (ASD), Installation Publications Official (IPO) will:

- (1) Manage Installation Blank Forms.
- (2) Enforce policies and regulations and instructions governing publications and printing.
- (3) Ensure each appointed Unit Publications Officer (UPO) has an active publication account; exercise blank forms and publication management responsibilities.
- (4) Maintain Fort Belvoir's active publications account roster.
- (5) Conduct a monthly inventory of Blank Forms located within ASD.

b. Organization S-1 Adjutants will:

**“LEADERS IN EXCELLENCE”**

(1) Ensure their organization has an active publications account. They can verify this information by contacting ASD at 703-805-1335. If an account needs to be established, or the UPO has changed, a DA Form 12-R will need to be filled out and sent to the IPO, in order to receive ordered publications.

(2) Appoint UPO's, as needed, to ensure each entity within the organization has current publications.

c. Unit Publications Officers will:

(1) Take inventory of blank forms and publications needed for their unit.

(2) Ensure they place orders on a DA Form 17.

(3) Refer DA Form 17 to ASD for processing.

**4. Publication Accounts.** All UPO's will establish a publications account through ASD. The UPO will fill out a DA Form 12-R and send to ASD for processing. Once approved, ASD will forward the 12-R to Army Publishing Directorate (APD) for account number assignment. An additional 12-R will need to be submitted when there is a change in account information. A detailed description on how to fill out the DA Form 12-R is located in Appendix A.

## **5. Ordering Publications .**

a. All orders will be placed on a DA Form 17 for ASD to send directly to Army Publishing Directorate (APD) for processing.

b. An additional memorandum, signed by the Unit's Commander, justifying the order may be required when:

(1) The order exceeds the allocated limit.

(2) Unit needs a re-occurring monthly order.

6. Point of Contact for Blank Forms and Publications information is the Installation Publications Officer, Ms. Noreen Modesto-Towns, (703) 805-1061 or e-mail [noreen.h.modesto-towns.civ@mail.mil](mailto:noreen.h.modesto-towns.civ@mail.mil).

NOREEN MODESTO-TOWNS  
Chief, Administrative Services Division

## Appendix A

### DA Form 12-R, Request for Establishment of a Publications Account

REQUEST FOR ESTABLISHMENT OF A PUBLICATIONS ACCOUNT		
For use of this form, see DA PAM 25-33; the proponent agency is ODISC4		
1. ACCOUNT NUMBER EXXXX	2. DATE PROCESS DATE	3. TYPE OF SUBMISSION a. <input type="checkbox"/> INITIAL b. <input checked="" type="checkbox"/> CHANGE c. <input type="checkbox"/> CLOSE
4. FROM (Include nine-digit ZIP Code) COMMANDER ORGANIZATION NAME ORGANIZATION ADDRESS	5. THRU (Include nine-digit ZIP Code) DHR, Administrative Services Division 9875 Michie Place Building 219 Fort Belvoir, VA 22060-5920	6. TO U.S. Army Publication Distribution Center 1655 Wooden Road St. Louis, MO 63114-6181
<b>SECTION I - GENERAL</b>		
7a. REQUEST AN ACCOUNT BE ESTABLISHED FOR THE FOLLOWING SERVICE: <input checked="" type="checkbox"/> PUBLICATIONS <input type="checkbox"/> BLANK FORMS <input type="checkbox"/> TEST MATERIAL (see para 2-5, DA PAM 25-33)		
7b. JUSTIFICATION FOR BLANK FORMS ( Use a separate sheet of paper if more space is needed.)		
<b>8. UNIT DESCRIPTION DATA (FAILURE TO COMPLETE THIS BLOCK WILL RESULT IN YOUR REQUEST BEING RETURNED.)</b>		
a. Component (Contractors must complete Block 8e and/or 8f.) <input checked="" type="checkbox"/> Active Army <input type="checkbox"/> Army Reserve <input type="checkbox"/> National Guard <input type="checkbox"/> Air Force <input type="checkbox"/> Marine Corps <input type="checkbox"/> Navy <input type="checkbox"/> DOD Activity <input type="checkbox"/> Contractor <input type="checkbox"/> Other		
b. TOE Number or TDA Number (Army Only)	e. Commercial and Government Entity (CAGE) Code (Contractors)	
c. Unit Identification Code (UIC) (Army Users) W4XXXX	f. Contract Number (if applicable)	
d. Military Assistance Program Address Code (FMS Users)	g. DOD Activity Address Code (Non-Army Users) or Navy UIC	
<b>9. PUBLICATIONS OFFICER FOR THIS ORGANIZATION WILL BE:</b>		
a. Typed Name, Grade and Title JOHN DOE, GS/RANK PROGRAM ANALYST	b. Signature	c. Telephone Number (DSN and Commercial) 655-XXXX/ 805-XXXX
<b>SECTION II - ACCOUNT CLASSIFICATION LEVEL</b>		
10. REQUEST THE FOLLOWING CLASSIFICATION LEVEL FOR THIS ACCOUNT: <input type="checkbox"/> UNCLASSIFIED <input type="checkbox"/> CONFIDENTIAL <input checked="" type="checkbox"/> SECRET		
11. THIS ORGANIZATION HAS ADEQUATE EQUIPMENT AND PROPERLY CLEARED PERSONNEL TO RECEIVE AND SAFEGUARD MATERIAL ACCORDING TO THE CLASSIFICATION REQUESTED FOR THIS ACCOUNT. IF CLASSIFIED SERVICE IS APPROVED, THE SECURITY OFFICER WILL BE:		
a. Typed Name, Grade and Title JOHN DOE, GS/RANK SECURITY MANAGER	b. Signature	c. Telephone Number (DSN and Commercial) 655-XXXX/ 805-XXXX
<b>SECTION III - CHANGE OF ADDRESS</b>		
12a. OLD ADDRESS (Include 9-digit Zip Code)	b. NEW ADDRESS (Include 9-digit Zip Code)	
Effective Date:		
<b>SECTION IV - AUTHENTICATING OFFICIALS</b>		
13a. Typed Name, Grade and Title of Commander JOHN DOE, GS/RANK DIRECTOR	b. Signature	c. Telephone Number (DSN and Commercial) 655-XXXX/ 805-XXXX
14a. Typed Name, Grade and Title of PCO/PSM NOREEN MODESTO-TOWNS, GS-11 ACTING CHIEF, ADMIN SRVCS DIV	b. Signature	c. Telephone Number (DSN and Commercial) 655-1061/ 703 805-1061

# Keep Account Information Current

If any of the following changes occur you should submit an updated DA Form 12-R

- Type of service (Block 7a)
- Unit description data (Blocks 8a thru g)
- Publication Officer (Blocks 9a thru c)
- Classification level (Blocks 10 thru 11c)
- Change of address (Blocks 12a and b)

# Change In Account Information

FormFlow Editor - [DA Form 12-R, Apr 96] File Edit View Insert Format Tools Date Locate Window Help

## Change of Address

REQUEST FOR ESTABLISHMENT OF A PUBLICATIONS ACCOUNT		
For use of this form, see DA RAM 25-33; the proponent agency is CDISC4		
1. ACCOUNT NUMBER Your account number	2. DATE	3. TYPE OF SUBMISSION a. <input type="checkbox"/> INITIAL b. <input checked="" type="checkbox"/> CHANGE c. <input type="checkbox"/> CLOSE
4. FROM (include nine-digit ZIP Code)	5. THRU (include nine-digit ZIP Code)	6. TO
SECTION I - GENERAL		
7a. REQUEST AN ACCOUNT BE ESTABLISHED FOR THE FOLLOWING SERVICE <input type="checkbox"/> PUBLICATIONS <input type="checkbox"/> BLANK FORMS <input type="checkbox"/> TEST MATERIAL (see para 2-5, DA RAM 25-33)		
7b. JUSTIFICATION FOR BLANK FORMS (Use a separate sheet of paper if more space is needed.)		
8. UNIT DESCRIPTION DATA (FAILURE TO COMPLETE THIS BLOCK WILL RESULT IN YOUR REQUEST BEING RETURNED.)		
a. Component (Contractors must complete Block 8e and/or 8f.) <input type="checkbox"/> Active Army <input type="checkbox"/> Army Reserve <input type="checkbox"/> National Guard <input type="checkbox"/> Air Force <input type="checkbox"/> Marine Corps <input type="checkbox"/> Navy <input type="checkbox"/> DOD Activity <input type="checkbox"/> Contractor <input type="checkbox"/> Other		
b. TOE Number or TDA Number (Army Only)		e. Commercial and Government Entity (CAGE) Code (Contractors)
c. Unit Identification Code (UIC) (Army Users)		f. Contract Number (if applicable)

# Change of Address (continued)

d. Military Assistance Program Address Code (FMS Users)		g. DOD Activity Address Code (Non-Army Users) or Navy UIC	
<b>9. PUBLICATIONS OFFICER FOR THIS ORGANIZATION WILL BE</b>			
a. Typed Name, Grade and Title <b>Person responsible for the management of the account</b>		b. Signature	c. Telephone Number <i>(DSN and Commercial)</i>
<b>SECTION II - ACCOUNT CLASSIFICATION LEVEL</b>			
10. REQUEST THE FOLLOWING CLASSIFICATION LEVEL FOR THIS ACCOUNT:			
<input type="checkbox"/> UNCLASSIFIED <input type="checkbox"/> CONFIDENTIAL <input type="checkbox"/> SECRET			
11. THIS ORGANIZATION HAS ADEQUATE EQUIPMENT AND PROPERLY CLEARED PERSONNEL TO RECEIVE AND SAFEGUARD MATERIAL ACCORDING TO THE CLASSIFICATION REQUESTED FOR THIS ACCOUNT. IF CLASSIFIED SERVICE IS APPROVED, THE SECURITY OFFICER WILL BE:			
a. Typed Name, Grade and Title		b. Signature	c. Telephone Number <i>(DSN and Commercial)</i>
<b>SECTION III - CHANGE OF ADDRESS</b>			
12a. OLD ADDRESS <i>(Include 9-digit Zip Code)</i> Enter your old Address		b. NEW ADDRESS <i>(Include 9-digit Zip Code)</i> Enter your new Address	
Effective Date: Enter effective date or mark "immediate"			
<b>SECTION IV - AUTHENTICATING OFFICERS</b>			
13a. Typed Name, Grade and Title of Commander		b. Signature	c. Telephone Number <i>(DSN and Commercial)</i>
14a. Typed Name, Grade and Title of PCQ/PSM		b. Signature	c. Telephone Number <i>(DSN and Commercial)</i>

## **IMPORTANT!!**

Any change in address for both **Confidential** and **Secret** level accounts requires the signature of the **Security Officer** (Block 11b) in addition to the **Publication Control Officer** (Block 9b).

## Validation Of Accounts

- Review your account information annually
- Any changes you submit will serve as the validation requirement
- The Point & Click Ordering System allows you to validate your account information online each time you LOG ON

## Closing An Account

- Submit at least 30 days prior to effective date
- Enter your account number in (Block 1)
- Mark (Block 3c)
- Additional blocks should be completed in accordance with type of account
- PCO (Block 9) signs, routes for additional signatures in accordance with locally established procedures
- Maintain a copy of the completed DA Form 12-R

# Address Format

It is important that the following 4 line address format be used.

<p>FIRST LINE: Name of office or title of position (Ex: Commander) SECOND LINE: Attention line, organization name, or building number) THIRD LINE: Street address (NO acronyms or building numbers) FOURTH LINE: City, State, Zip Code (9 digit)</p>
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- UPS cannot deliver to a P.O. Box.
- Presort software does not recognize acronyms or building numbers.
- Address typed in **ALL CAPITAL LETTERS** with no punctuation is preferred.

## Sub Accounts

- Created by the primary account manager in (Block 9a) as an internal management tool
- Sub accounts make it easier for account managers to sort and distribute stock receipts to their customers
- Sub accounts must never make changes to the account address or 12 series (subscription)



**INSTRUCTIONS FOR PREPARING DA FORMS 17 AND 17-1**

1. Use DA Forms 17 and 17-1 (Continuation Sheet) will be used to request publications for resupply purposes on a when-needed basis.

2. Copies required. Requisitions will be submitted as follows:

- a. Original only. Unclassified publications and nonaccountable/nonsensitive blank forms.
- b. In duplicate. Classified and FOUO publications; accountable and sensitive forms; school textbook requirements including Army Extension Course materials; ROTC requirements.
- c. Assembly. When submitted in duplicate, requisitions will be assembled so that the original and duplicate copy of page 1 remain together, followed in sequence by the original and duplicate copy of each continuation sheet.

3. Completion of entries.

a. Header information.

(1) Number of pages. Enter total number of pages in the complete requisition.

(2) Date of requisition. Enter current date.

(3) Account number. Enter assigned account number, if applicable.

(4) Requisition number. Leave blank.

(5) Name of requisitioning agency. Self-explanatory. Leave blank if same as "ship to" address item 6j.

b. Item 1. Check either "regular" or "special". Special requisitions will be submitted only when normal resupply action (requisition turnaround time) will not satisfy the need for the

c. Item 2. Use only if "special" is checked in item 1. Complete justification for special handling must be furnished.

d. Item 3. Use only when requisition is marked "special." Enter date (written as the follow date) when items are required.

e. Item 4. Check appropriate block if applicable.

f. Item 5. Enter the proper post stockroom stocking the items being requested.

g. Self-explanatory.

h. Item 7. Group each category of publications or blank forms together, such as Army Regulations, DA Pamphlets, Field Manuals, DA Forms, DD Forms, etc. List items in numerical sequence within each category, for example, AR 10-5, AR 210-25, AR 380-5. Use a separate line for each item.

(1) Column a. List line item number starting with 1 in sequence regardless of category.

(2) Column b. Enter numerical designation for title of unnumbered items. Items will be ordered as follows:

AR 10-1 (when only the basic publication is desired)  
AR 10-1 and changes (when a basic publication including all current changes is desired)  
AR 10-1, C1 (when a specific change(s) only is desired)

(3) Column c. For forms only, enter the unit of issue, such as "pad", "set", "sheet", etc. Units of issue are shown in DA Pamphlet 310-2.

(4) Column d. Enter the quantity needed of the item.

i. Item 8. Self-explanatory.

Items number 9 through 17 are provided for use by sources of supply for publications and blank forms. The following annotations will be used as advice of supply action recorded requisitions submitted thereto:

Item 9-

Column a - Items partially or completely shipped will be indicated by a check mark in this column. If partial shipment is made, actual quantity shipped will be indicated in Column c, "Other Action."

Column b - Items partially or completely unavailable which are established as drop-out will be indicated by a check mark in this column. Such items will not be resupplied because the source of supply will automatically furnish these items when stock is available. Such items may be requisitioned if additional quantities are required.

Column c - Items cancelled will be indicated in this column, the following symbols may be used:

C1 - Item cannot be identified. Furnish copy of item or refer to directive governing its use.

DSS - Item has been declared obsolete, cancelled, superseded or suspended. Further identification will be shown under Column c, "Other Action."

UR - Item under revision - no stocks available. Initial distribution or notice of availability will be made.

NYP - Item is new - not yet available. Initial distribution or notice of availability will be made.

ID - Initial distribution has been made, is being made or will be made in near future. ID dates will be shown in Column c, "Other Action."

NS - Item not stocked and source of supply not shown. If known, source of supply will be shown in Column c, "Other Action."

NR - Supply of item is exhausted and item will not be reprinted.