

HQDA STAFF ACTION MEMORANDUM

 URGENT

 ROUTINE

1. SUBJECT

 2. SUSPENSE DATE
(YYYYMMDD)

3. OFFICE SYMBOL

4. HQDA/SACO TRACKING NUMBER

5. TODAY'S DATE (YYYYMMDD)

6. ACTION REQUIRED

 APPROVE SIGNATURE INFORMATION DECISION OTHER _____

 7. BACKGROUND *(Describe the origin of the action, background, and the requirement. (10 line maximum))*

 8. SUMMARY OF ACTION *(Executive Summary - include impact statements, metrics, trends, etc. (10 line maximum))*

 9. RECOMMENDATION *(State the recommended action to be taken by the Principal Official. (2 line maximum))*

 10. COORDINATIONS *(Continuation sheet on page 2)*

CONCUR	NONCONCUR	OFFICE	NAME	PHONE	DATE (YYYYMMDD)

11. APPROVALS

TITLE	INITIALS	DATE (YYYYMMDD)	TITLE	INITIALS	DATE (YYYYMMDD)	APPROVED	NOTED	SEE ME	BRIEF	NOTE CHANGES
BRANCH CHIEF			ECC							
DIVISION			EXEC. OFFICER							
DIRECTOR			DEPUTY							
SACO			PRINCIPAL							

 12. FILE LOCATION *(Identify File location - Example: J:\Common\B Doe\Congressional\CivPay.doc)*

13. ACTION OFFICER NAME

14. RANK/POSITION

15. EMAIL ADDRESS

16. PHONE NUMBER

