

CAMP ATTERBURY JOINT MANEUVER TRAINING CENTER

Daily Strength Report

(Instruction for completing this form on reverse or may be obtained from Scheduling Branch)

Date: _____

Reporting Unit/Organization: _____

Address: _____

Telephone: _____

On Post Hq Bldg No: _____ Post Phone Ext: _____

Office use.

Unit	(D)UIC	Training Status*	Total

***Training Status**

CODE

AT.....Annual Training

IDT Inactive Duty for Training

MOBMobilization

DMOB Demobilization

MSPMOB/DeMOB Support

ACActive Duty
(Not NG or Reserve)

OTH..... Other
(CIV other NON-military)

SAD State/Fed Emergency

FTSFull Time Support
(ISU & Tenant ONLY)

Certification:

Printed Name/Rank

Signature

Date

Received By:

Printed Name/Rank

Signature

Date

Instructions for completing CAJMTC Form 14, 25 MAY 2004

1. The following explain the uses of each section or block on the CAJMTC Form 14, 25 MAY 2004:

- a. Date – The date for which the numbers are being reported.
- b. Reporting Unit/Organization – The unit/organization completing the form.
- c. Address – The mailing address of the unit/organization completing the form
- d. Telephone – The telephone number for a POC should there be a need to clarify information on the form.
- e. On Post Hq Bldg No – The building number on Camp Atterbury where the unit/organization is conducting business from.
- f. Post Phone Ext – The four digit extension for location where the unit/organization is conducting business from.
- g. Completing the table:
 - (1) Unit – The unit/organization for which the numbers on this line apply
 - (2) (D)UIC – The (derivative) unit identification code for military units
 - (3) Training Status – Select or input a code from those listed in the Training Status box. If the unit is in more than one status use additional lines
 - (4) Total the number of personnel present for that line.
- h. Certification – the name, signature and dated certifying that the information provided on the form is correct and accurate to the best of their knowledge.
- i. Received By – Is the name, signature and date for the person to whom the form was turned into. If the form is placed in a drop box, indicate this information before leaving the form. (A copy of this form should be retained by the reporting unit/organization.)

2. It is the responsibility of the reporting unit/organization to ensure the reported information is as accurate as possible. Additionally, the reporting unit should keep a copy of the form for historical reference and in the case it may need to be resubmitted.