



Signals Handbook for Small Teams

Supplement A:
Blank Forms.

1st Edition

Legal

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Thanks

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And Thanks to My wife for putting up with my working on this project.

Introduction

This is a supplement to Volume One.

It includes just the blank forms, and no printed page numbers so that groups can print forms for their own use.

The page numbers listed below should coincide with printed pages, so if you want 5 copies of SITREP, simply print 5 copies of only page XXX

pp 4: One Time Pad Worksheet

pp 5: Jamming/Interference Report

pp 6: SITREP

pp 7: SPOT Report (SALUTE)

pp 8: COMPLAN

pp 9: 9-Line Air Medevac Request

pp 10: 9-Line Ground Medevac Request

pp 11: DRYAD

pp 12: Blank Codebook

pp 12-13 Blank 10-cycle SOI

One Time Pad Worksheet			Destroy after use!!!		
<i>To encrypt, work top to bottom, to decrypt, work bottom to top</i>					
Unnnncrypted	<i>This block should match key to verify proper key used.</i>				
Key					
Ciphertext					
Unnnncrypted					
Key					
Ciphertext					
Unnnncrypted					
Key					
Ciphertext					
Unnnncrypted					
Key					
Ciphertext					
Unnnncrypted					
Key					
Ciphertext					

code	A	B	C	D	E	F	G	H	I	J	K	L	M	N
00	01	02	03	04	05	06	07	08	09	10	11	12	13	14
O	P	Q	R	S	T	U	V	W	X	Y	Z	?	!	_
15	16	17	18	19	20	21	22	23	24	25	26	27	28	29
0	1	2	3	4	5	6	7	8	9	+	-	*	/	=
30	31	32	33	34	35	36	37	38	39	40	41	42	43	44

Jam/ Interference Report		DTG:	Unit:
1	Interference	(1)	
	<i>Describe the interference</i>		
2	Location	(2)	
3	Start of interference	(3)	
4	End of interference	(4)	
5	Effects	(5)	
	<i>What impact did the interference have on operations</i>		
6	Frequency	(6)	
7	Equipment being used	(7)	
8	Narrative (8)		
9	Authentication	(9)	

Instructions:

Date and Time the report was made

Unit making report

Line 1: Describe the interference: Static? Tones? Music? Speech? Digital noise? Ect..

Line 2: The location that the detecting unit was when interference was detected. Use whatever common format used by the unit. Lat/Long, UTM, MRGS, or location descriptions.

Line 3: What time was the interference first detected

Line 4: What time did the interference stop, or the equipment being affected be turned off, or to another frequency

Line 5: What impact did the interference have on operations? I.E. Had to change channel, or could not communicate with another unit, ect...

Line 6: What frequency (or channel) was the interference detected

Line 7: What radio or equipment was being affected? (Make, model, brand, antenna, ect...)

Line 8: Narrative: Describe in a few normal sentences what happened

Line 9: Authentication: Who/what/how was this report verified as legitimate, and not a fake report from an inposter? I.E. was it authenticated by a radio IFF procedure and by whom?

SITREP		DTG:	Unit:
1	Current Location	(1)	
2	Activities of previous 24 hours	(2)	
3	Planned Activity for next 24 hours		
4	Casualties	(4)	
5	Ammo & Equipment Status	(5)	
6	Enemy contacts/KIA	(6)	
7	Intel (7)		
8	Notes (8)		
	<i>In Notes, include Time it would take to go on the move, any compromise of COMSEC materials and sensitive items, ect...</i>		
9	Authentication	(9)	

Spot Report		DTG:	Unit:
1	Size of the enemy unit	(1)	
2	Activity of the enemy Unit	(2)	
<i>What were they doing when observed, how were they carrying themselves.</i>			
3	Location of Enemy Unit	(3)	
4	Uniforms worn/Insignia	(4)	
5	Equipment being carried	(5)	
<i>What weapons, vehicles, and electronics were visible? How were they carried? What was in use?</i>			
6	Narrative (6)		
7	Authentication	(7)	

COMPLAN		Effective Dates/times:			
Plan Name:					
	<u>Link</u>	<u>Primary</u>	<u>Alternate</u>	<u>Contingency</u>	<u>Emergency</u>
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
<i>Use a second line if any links contain multiple Alternate/Contingency/Emergency methods</i>					
Scheduled Contacts:					
	<u>Date (or recurring)</u>	<u>Link</u>	<u>Primary Time</u>	<u>Alternate Time</u>	<u>Contingency Time</u>
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
<i>If a scheduled contact is at regular interval, use that instead of date i.e.: Every day, or every Sunday, etc. If it is an interval then specify the start, such as every third day starting 13Jan.</i>					
Mission Codewords:					
	<u>Codeword</u>	<u>Meaning</u>			
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					

6. Air Medevac 9-Line Request

Air-Medevac 9-Line request		DTG:	Unit:
1	Location (UTM/Lat-Long)	(1)	
2	Callsign & Frequency	(2)	
3	Number of Patients/ Precedence	(3)	
	A- Urgent (less than 2 hours to save life)	B- Surgical Urgent	
	C- Priority	D- Routine	E- Convenience
4	Special Equipment Required	(4)	
	A- None	B- Hoist	C- Extraction
		D- Ventilator	E- Jungle penetrator
5	Number of patients by Typr	(5)	
	L- Litter	A- Ambulatory (walking)	
6	Security at LZ	(6)	
	N- No enemy	E- Enemy in area	
	P- Possible enemy	X- Armed escort required	
7	LZ Marking Method	(7)	
	A- Panels	B- Pyro	C- Smoke
		D- None	E- Other
8	Nationality/Status	(8)	
	A- Friendly Military	B- Friendly Civilian	C- Non Allied Military
	D- Non Allied Civilian	E- Enemy POW	
9	Terrain/Obstacles	(9)	
Notes:			

7. Ground Medevac 9-Line Request

Ground Medevac Request		DTG:	Unit:
1	Location (UTM/Lat-Long)	(1)	
2	Callsign & Frequency	(2)	
3	Number of Patients/ Precedence	(3)	
	A- Urgent (less than 2 hours to save life)	B- Surgical Urgent	
	C- Priority	D- Routine	E- Convenience
4	Special Equipment Required	(4)	
	A- None	B- Hoist	C- Extraction
		D- Ventilator	E- Jungle penetrator
5	Number of patients by Typr	(5)	
	L- Litter	A- Ambulatory (walking)	
6	Security at LZ	(6)	
	N- No enemy	E- Enemy in area	
	P- Possible enemy	X- Armed escort required	
7	LZ Marking Method	(7)	
	A- Panels	B- Pyro	C- Smoke
		D- None	E- Other
8	Direction of recommended approach	(8)	
9	Terrain/Obstacles	(9)	
Notes:			

