



Operations

***AIR FORCE RESERVE COMMAND (AFRC)
UNIT NOTIFICATION AND ASSEMBLY PROCEDURES***

COMPLIANCE WITH THIS PUBLICATION IS MANDATORY

OPR: 913 AW/CVE (Capt Debra L. Fetherman)

Pages: 5

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AFRCI 10-404, 15 March 1998, is supplemented as follows:

1. (913 AW) The Wing Operations Center (WOC) will be the office of primary responsibility for managing and monitoring the recall program for the 913th Airlift Wing. The Wing Operations Center will complete an annual schedule of no-notice communications tests.

2.7. (913 AW) Results of an actual or test notification will be reported to the Wing Operations Center for higher headquarters reporting if required.

3.1.2. (913 AW) Each unit commander will conduct a no-notice communications test annually for assigned personnel (see attachment 1 for sample of Unit Notification Results-Sample Message Format). Each unit will notify the Wing Operations Center when they begin and end the no-notice communications test.

3.1.4. (913 AW) Each unit will assign an office of primary responsibility for the unit recall program. This letter of assignment for each unit will be maintained in the Wing Operations Center.

3.1.5. (913 AW) Each unit will validate quarterly individual, address, home driving directions and telephone data. (See attachment 2 for sample of Verification Format for Unit Notification Data.) The "Paul Revere" Recall Roster Worksheet will be used to record individual recall data (see attachment 3).

3.1.6. (913 AW) Each unit will forward a copy of the annual communication test results to the Wing Operations Center.

4.1.2 (913 AW) For actual recall or mobilization under comm-out conditions, each unit will maintain driving directions to individual homes. Individuals within 60 mile radius of Willow Grove Air Reserve Station will be notified at their home address by messenger. Individuals longer distances from the base will also be notified by messenger or sent a certified letter with appropriate information for recall or mobilization if commander deems necessary.

CHARLES D. ETHREDGE, Colonel, USAFR
Commander

Attachment 1

**UNIT NOTIFICATION RESULTS
NO NOTICE COMMUNICATIONS TEST**

1. DATE AND TIME OF COMMUNICATIONS TEST OR RECALL (ZULU): _____

2. START TIME: _____

3. UNIT DATA:

A. (_____/_____/_____) (_____) / (_____)
UNIT PAS CODE UIC AUTHORIZED ASSIGNED

CONTACTED WITHIN 12 HOURS: (NUMBER/PERCENT ASSIGNED) _____ / _____

CONTACTED WITHIN 24 HOURS: (NUMBER/PERCENT ASSIGNED) _____ / _____

B. TOTAL CONTACTED: (NUMBER) / (PERCENT ASSIGNED) _____ / _____

4. REMARKS: (COMMANDER'S COMMENTS, PROBLEMS, LIMITING FACTORS)

5. NAME AND TELEPHONE NUMBER OF AUTHENTICATING INDIVIDUAL/POC:

Attachment 2

VERIFICATION FORM FOR UNIT NOTIFICATION DATA

Please refer to the attached **ALERT/NOTIFICATION ROSTER**. I certify that the individual, address, telephone data and home driving directions are accurate for the members listed below. If someone has inprocessed to your section after the effective date of the attached roster, have them complete a "Paul Revere" Worksheet. Return to Captain Fetherman/SMS Heyman.

- 1. _____
- 2. _____
- 3. _____
- 4. _____
- 5. _____
- 6. _____
- 7. _____
- 8. _____
- 9. _____
- 10. _____
- 11. _____
- 12. _____
- 13. _____
- 14. _____

First Quarter Certification:

_____	_____	_____
Supervisor Signature	Functional Area	Date

Second Quarter Certification:

_____	_____	_____
Supervisor Signature	Functional Area	Date

Third Quarter Certification:

_____	_____	_____
Supervisor Signature	Functional Area	Date

Fourth Quarter Certification:

_____	_____	_____
Supervisor Signature	Functional Area	Date

Attachment 3

“PAUL REVERE” RECALL ROSTER WORKSHEET

WILLOW GROVE AIR RESERVE STATION, PA 19090-5203

REQUEST YOU PROVIDE THE OVER-THE-ROAD DIRECTIONS TO REACH YOUR HOME (OR THE HOME YOU WOULD OCCUPY IN THE EVENT OF MOBILIZATION). DIRECTIONS MAY BE GIVEN USING COMPUTER MAPPING PROGRAM. AS THERE IS ALWAYS THAT POTENTIAL FOR LOSS OF TELEPHONIC OR OTHER ELECTRONIC COMMUNICATION, IT IS ESSENTIAL THAT A CONTINGENCY METHOD OF RECALL NOTIFICATION BE ESTABLISHED. THIS SYSTEM IS KNOWN AS THE “PAUL REVERE” METHOD. PROVIDE DETAILED DIRECTIONS AND INFORMATION NECESSARY FOR AN INDIVIDUAL TO DEPART THIS STATIONS AND PROCEED OVER-THE-ROAD TO YOUR RESIDENCE. THIS INFORMATION WILL BE MAINTAINED IN A MASTER FILE IN THE UNIT ORDERLY ROOM AND MUST BE MAINTAINED CURRENT AT ALL TIMES. A BRIEF DESCRIPTION OF YOUR HOUSE OR LOCAL LANDMARKS SHOULD BE INCLUDED IF IT WILL AID IN LOCATING YOUR HOME. LIKEWISE, A SKETCHED MAP MAY BE INCLUDED ON THE REVERSE SIDE OF THIS WORKSHEET OR A COMPUTERIZED MAP MAY BE ATTACHED.

GRADE: _____ **NAME:** _____ **HOME PHONE:** _____

HOME ADDRESS: _____ **BUSINESS PHONE:** _____
(STREET NAME)

_____ **CELL PHONE:** _____
(CITY) (STATE) (ZIP CODE)

*******DIRECTIONS*******

FROM THE AIR FORCE GATE AT WGARS: _____

(Place a map on reverse side if necessary)