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AIR FORCE MATERIEL COMMAND**

**AIR FORCE MATERIEL COMMAND  
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**Logistics**

**SUPPLY CHAIN MANAGEMENT QUALITY  
ASSURANCE PROGRAM (SCM QAP)**

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This instruction supports guidance contained in Air Force Instruction (AFI) 20-111, *Logistics Compliance Assessment Program*; Air Force Manual (AFMAN) 23-110, *USAF Supply Manual*; and AFI 90-201, *Inspector General Activities*. This instruction provides specific guidance for implementing the SCM QAP. It prescribes basic assessment policy and procedures to be used throughout AFMC and provides senior leadership and management direction for standardizing and verifying the accomplishment of the mission in accordance with Department of Defense (DoD), United States Air Force (USAF), and AFMC policy. This publication does not apply to Air National Guard (ANG) and Air Force Reserve Command (AFRC) units. Waiver authority for this instruction is AFMC/A4U. Refer recommended changes to the Office of Primary Responsibility (OPR) using AF IMT 847, *Recommendation for Change of Publication*, route AF IMT 847s from the field through the appropriate functional's chain of command. Ensure that all records created as a result of processes prescribed in this publication are maintained in accordance Air Force Instruction AFI 33-360, *Publications and Forms Management*, and disposed of in accordance with the Air Force Records Disposition Schedule (RDS) located at <https://www.my.af.mil/gcss-af61a/afirms/afirms/rims.cfm>

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## Chapter 1

### GENERAL PURPOSE AND SCOPE

**1.1. Purpose.** The purpose of the Quality Assurance Program (QAP) is to provide leadership at all levels with an assessment of the unit's ability to perform key supply chain management (SCM) processes ensuring standardized, repeatable, technically compliant process execution, while promoting a culture of professional excellence and personal responsibility. It is the Commander's single point of contact for "health of the organization" issues and therefore must be staffed with the most professional, technically compliant technicians. The overall program intent is to instill vigor and rigor into our SCM processes and personnel. The QAP provides an objective sampling of both the quality of processes and the proficiencies of personnel. The program is designed to provide Commanders with a method of evaluating compliance with Air Force, MAJCOM, and local directives and policies.

**1.2. Scope.** The policy and procedures prescribed in this document apply to all personnel performing duties across the full spectrum of SCM functions involving planning, execution, operations, strategy and integration. All units must be in compliance no later than 90 days from the date of this instruction. The combined efforts of QA personnel, leaders, and technicians are necessary to ensure high quality SCM processes, strict compliance to established policy and procedures, and equipment reliability. The QA section evaluates the quality of SCM processes accomplished and performs necessary functions to ensure compliance. The QA section serves as the primary technical advisory agency in the organization, helping supervisors and commanders resolve quality problems. The assessment and analysis of deficiencies and problem areas are key functions of QA that highlight and identify underlying cause of poor quality in SCM. QA personnel are not an extension of the workforce; their purpose is to observe, assess, and evaluate SCM processes ensuring quality process execution and personnel proficiency.

**1.3. Philosophy.** The primary focus of Quality Management is defect prevention, achievement of stable and capable processes, and continuous improvement. AFMC is committed to providing superior quality weapon systems, end-items, supplies and services to our customers. AFMC program offices, buying offices, Air Force Research Laboratory (AFRL), and all Air Logistics Centers (ALC) must maintain acquisition and/or sustainment quality assurance processes consistent with Air Force and DoD policy. The core concepts of which are: (1) Process documentation and control, (2) Utilization of metrics, and (3) Continuous improvement as integral functions throughout Integrated Life Cycle Management, SCM, and Depot Maintenance activities. Quality is defined as conformance to established requirements and standards. QA is a process that provides adequate confidence that controls are in place to create products and services that conform to established requirements/standards. QA is an integral part of all life cycle management, SCM, and depot maintenance activities. All acquisition and sustainment personnel will be responsible for performing quality functions involved in their assigned duties. Program documentation will describe the quality management system and how it will contribute to minimizing cost, schedule and performance risks throughout the product life cycle.

## Chapter 2

### RESPONSIBILITIES

#### 2.1. HQ AFMC/A4U will:

- 2.1.1. Establish policy and implementation procedures in support of the QAP.
- 2.1.2. Recommend program policy and administrative changes.
- 2.1.3. Monitor and review subordinate programs.
- 2.1.4. Establish a method of collection, analysis of significant findings, and reporting requirements for subordinate units.
  - 2.1.4.1. MAJCOM approved QA database to capture assessment data.

#### 2.2. The AFGLSC/CC will:

- 2.2.1. Appoint an AFGSLC Center's Compliance Manager (CM). The CM must be a Commissioned Officer, Senior Noncommissioned Officer (SNCO), or civilian equivalent.
  - 2.2.1.1. Establish an effective QA function. The program must include local inspections and personnel/process evaluations to ensure their programs, processes, technician proficiency, equipment condition, and other focus areas are in compliance with AF, Lead Command and local directives.
  - 2.2.1.2. Lead quarterly QA summary meetings to assess unit performance and actions taken to analyze, correct and improve SCM processes. Center commanders may delegate responsibility.
  - 2.2.1.3. Review summary QA inspection results and metrics at least once a quarter.

#### 2.3. The AFGLSC/IG :

- 2.3.1. Be the primary liaison between external inspection agencies, AFMC/A4U, and AFGLSC units.
- 2.3.2. Develop center-level metrics and QAP reporting requirements.
- 2.3.3. Review quarterly reports for trends and effectiveness of QAP.
- 2.3.4. Provide a quarterly summary of QA inspection results and metrics to AFGLSC/CC.
- 2.3.5. Develop methods to share trends and critical QA information across the AFGLSC Enterprise.

#### 2.4. The 448 SCMW/CL, 635 SCOW/CC, 591 SCMG/CC and ESC/HNC will:

- 2.4.1. Appoint or delegate the appointment of a CM and establish QA function(s) to the level necessary to administer, manage, plan and execute all aspects of the QAP.
- 2.4.2. Establish an effective QA function. The program must include local inspections and personnel/process evaluations to ensure their programs, processes, technician proficiency, equipment condition, and other focus areas are in compliance with AF, Lead Command and local directives.

2.4.3. Designate, in writing, a CM and full-time evaluators. Appointment letters must specify the primary area(s) the manager and evaluators are assigned to evaluate and any augmentees that are assigned to support assessments in the respective areas. Attachment 3 provides a sample format. Appointment letters will be maintained by the CM.

2.4.4. Lead QA Monthly Summary Brief to assess unit performance and actions taken to analyze, correct, and improve SCM processes.

## **2.5. The Compliance Manager (CM) will:**

2.5.1. Be responsible for the administration of the unit's QA program on behalf of the commander.

2.5.2. The CM must be a Commissioned Officer, Senior Noncommissioned Officer (SNCO), or civilian equivalent with logistics and/or SCM experience.

2.5.3. Organize a QAP team, composed of sufficient personnel and subject matter experts to assess the ability of SCM functions to perform processes in a safe, standardized, repeatable and technically compliant manner.

2.5.4. Develop assessment checklist – The assessment checklist is used to perform evaluations and inspections. The assessment checklist may be derived from higher headquarters' published checklist.

2.5.5. Develop routine inspection list (RIL) – The RIL is a Unit developed list of routine inspections that must be performed. Frequency is determined by CM. Tasks shall not be removed from the RIL without CM approval. Provide copies of approved lists to all affected organizations.

2.5.5.1. List shall be approved by the Wing/Group/Branch and reviewed at least quarterly for applicability.

2.5.6. Develop a Quality Assurance Assessment Guide.

2.5.6.1. The guide as a minimum will include:

2.5.6.1.1. Responsibilities.

2.5.6.1.2. New Inspector Training.

2.5.6.1.3. Assessment Techniques and Philosophy.

2.5.6.1.4. Debriefing Guidance.

2.5.6.1.5. Assessment Checklists.

2.5.7. Develop and implement a Quarterly Evaluation and Inspection Plan to ensure all assigned SCM functions are evaluated on a consistent and equitable basis.

2.5.7.1. The plan as a minimum will include:

2.5.7.1.1. Inspector Guidelines.

2.5.7.1.2. Routine Inspection Listing.

2.5.7.1.3. Acceptable Quality Levels (AQL). The CM will establish the AQLs. An AQL denotes the maximum allowable number of minor findings that a RIL task, process or product may be charged for the task to be rated "Pass." It must be strict

enough that the task, process or product meets an acceptable level of quality, but isn't so strict that a "pass" rating is unattainable. The AQL is derived/revised from QA performance-based data. The AQLs can be adjusted by the CM depending of inspection analysis and trends.

2.5.7.1.4. Listing of what evaluation and inspection areas, types, and number of each that must be conducted for each squadron, flight, or section over the course of a quarter.

2.5.7.1.5. Assessment and Documentation Guidelines.

2.5.8. Maintain a list of former military evaluators and recall them on a temporary basis if needed during Air and Space Expeditionary Force (AEF) rotations or other periods of extended absence. *NOTE: The list must also include the area(s) they were assigned to evaluate.*

2.5.9. Conduct and distribute a Monthly QA Summary Briefing to leadership and subordinate units, as applicable. (See para 4.4 for requirements)

2.5.10. Evaluate unit SCM procedures, including locally developed forms, publications, OIs, checklists etc., for accuracy, intent, and necessity every 2 years (document these reviews).

2.5.11. Review new and revised instructions, directives, technical data, and Time Compliance Technical Orders (TCTO) for completeness, accuracy and applicability to the unit. Inform applicable work centers of changes and up channel any problems discovered during this review.

2.5.12. Ensure an annual self-inspection of the QA Section is conducted and all findings are reported to the commander. An individual outside the QA office may accomplish this; however, it is very important that the person be knowledgeable of the function they are inspecting.

2.5.13. Ensure evaluation and inspection reports are entered into the MAJCOM approved QA database. Ensure all discrepancies are tracked until closure.

2.5.14. Prepare cross-tell information bulletins and messages as requested by commander.

2.5.15. Ensure equal numbers of assessments are conducted on each shift to include weekends. When units are involved in official exercises or contingencies this requirement can be waived by the commander during the specified time period. The commander must complete a signed memo specifying the reason and timeframe for the waiver. The waiver must be included in the monthly report.

2.5.16. Conduct annual Evaluator Proficiency Evaluations (EPEs) on unit evaluators to ensure proficiency and standardization.

2.5.17. Attend safety briefings on a random basis to check for effectiveness.

## Chapter 3

### ASSESSMENT REQUIREMENTS AND METHODOLOGY

**3.1. Program Guidance.** The QA Sections will perform analysis and trend identification of SCM processes through personnel evaluations on all assigned personnel and inspections of processes. Commanders/Directors must ensure oversight is provided for all SCM processes. The QA Section is focused on centralized oversight of critical squadron programs, most of which are executed at the flight level. The QA evaluators have authority to assess, observe, and document SCM activities.

3.1.1. The QA Section will be aligned under the CM. The QA Section will serve as the primary technical advisory agency, assisting supervision at all levels to resolve quality problems, may assist in developing corrective action strategies and enhance the overall quality of SCM processes. The QA Section will coordinate with the Functional OPRs to assist with enterprise requirements processes.

**3.2. Personnel Requirements.** Selecting the right personnel to fill the QA section is critical to a successful QA program and ultimately the success of a unit's mission. Assigned personnel must reflect the highest standards of professionalism, be impartial, objective, and consistent in all assessments. Leadership should only select qualified personnel that are considered established functional experts, clearly adhere to and understand policy and guidance, and are able to communicate clearly (verbally and written).

3.2.1. Evaluators can be military, civilian, or service providers. The commander or designator must appoint evaluators in writing.

3.2.1.1. Military QA evaluators must be a TSgt or higher and possess at least a 7-skill level. If no qualified candidates meet this requirement, SSgts who have completed 7-level upgrade actions may be appointed by group commander/director waiver. Waiver letter must be attached to the appointment letter.

3.2.1.2. Military QA evaluators must hold the same AFSC of those being evaluated on technical tasks contained in the applicable Career Field Evaluation and Training Plan (CFETP). For TSgt and below, an evaluator-specific Air Force Form 797, Job Qualification Standard Continuation Command (JQS) must be created and maintained in Training Business Area (TBA).

3.2.1.3. Areas authorized to evaluate will be identified in the evaluator's Specialty Training Standard (STS). **Exception:** If the evaluator is a SNCO with an awarded 7-skill level, the evaluator appointment letter will serve as the STS qualification document. **NOTE:** Evaluators are also required to maintain any/all specialty training as applicable, i.e., Hazardous Materials, Joint Inspections, etc.

3.2.1.4. Civilian and service providers QA evaluator must have 3 to 5 years experience in the functional discipline they are responsible for evaluating. If no qualified candidates meet this requirement, the CM may appoint by commander waiver. Evaluator duties must be included in the position description. Waiver Letter must be attached to the appointment letter.

### 3.3. QA Personnel Training Requirements.

3.3.1. All QA personnel must be trained to the extent necessary to perform QA functions. Training must cover evaluator responsibilities, evaluation and inspection techniques, metrics analysis, inspection worksheet documentation, report writing, problem-solving, publications management, and actions to prevent personnel injury or equipment damage. The formal QA inspector course may be used to supplement this training. Document QA evaluator training. Mandatory training consists of:

3.3.1.1. QA Logistics Evaluator Course (format/course yet to be determined). When established, it is mandatory for all QA personnel to complete within 60 days. All standard training will be accomplished by CBT course offerings.

3.3.1.2. Root Cause Analysis and Corrective Action Plan Training. Techniques found in the *Air Force Smart Operations for the 21st Century Playbook, Volume B (Ver 2.0): Introduction to the Eight Step OODA Loop AFSO Problem Solving* (located on the Air Force Portal at <https://www.my.af.mil/gcss-af/USAF/ep/globalTab.do?channelPageId=s6925EC13515C0FB5E044080020E329A9>).

3.3.1.3. Nuclear Weapons Related Materiel (NWRM) Fundamentals Course or equivalent as prescribed by AFI 20-110, if evaluating NWRM specific tasks. Found on the Advanced Distributed Learning System (ADLS) website.

3.3.1.4. Specific courses required to qualify individuals for those tasks being evaluated (i.e., HAZMAT training, environmental compliance, safety, etc.).

3.3.2. To become fully qualified, evaluators must accomplish mandatory training and pass three Evaluator Proficiency Evaluations (EPEs) within 90 days of appointment conducted by a qualified evaluator. Each QA evaluator, permanent or augmentee, must pass the EPEs prior to performing unsupervised assessments. At a minimum, a qualified evaluator must ensure that the inspector can execute the proper steps to conduct an assessment.

3.3.3. For all tasks, inspectors must be familiar with the requirements/procedures of tasks they evaluate.

**3.4. Quality Assurance Augmentation.** If a functional area does not warrant a full-time position in QA, but specialized expertise is required, select qualified technicians that are recommended by their Flight Chief/Superintendent to be augmentee(s). Each QA must maintain a listing of current augmentees. The CM establishes augmentee duties.

3.4.1. QA augmentees require an annual EPE on either a PE or technical inspection to remain qualified.

**3.5. Rotation of Quality Assurance Personnel.** The CM is responsible for developing and executing a plan to rotate QA personnel. Personnel shall be assigned to QA for a minimum of 36 months and a maximum of 48 months. Air Force Reserve, civilian, and service provider employees do not have any time requirements.

**3.6. Assessment Methodology.** Assessments are the formal avenue to ensure the effectiveness of SCM processes and identify areas for improvement. They provide leadership with factual information about the health and effectiveness of the unit and training. Accurate assessments of personnel proficiency and processes are critical to gauging unit effectiveness. This program is

intended to enhance cross-tell and facilitate benchmarking, while allowing latitude to adapt it for local needs. QA assessments will be conducted through the use of evaluations, inspections, and observations.

3.6.1. Evaluations. Represent the direct evaluation of a SCM action, inspection, or training conducted/performed by an individual or team. Evaluations are used to evaluate job proficiency, degree of training, and compliance with technical data or instructions. Any individual performing, supervising, or evaluating SCM tasks are subject to a direct evaluation. Evaluations are rated as “Pass” or “Fail”. A “Fail” assessment is defined as failing any major question/process or exceeding the AQL on the assessment checklist.

3.6.1.1. Personnel Evaluations (PE). A PE is the over-the-shoulder (direct) evaluation of an individual or team conducting/performing a SCM action. Use PEs to evaluate job proficiency, degree of training and compliance with technical orders (TOs) and other directives, determine the accuracy and efficiency of technical procedures assess compliance with TOs and other directives, accurately document results of evaluations.

3.6.1.2. Evaluator Proficiency Evaluations (EPE). An EPE is the direct evaluation of a QA individual or any individual performing a quality/compliance or quality assurance function in a unit.

3.6.1.3. Trainer Proficiency Evaluations (TPE). A TPE is the direct evaluation of a unit instructor/trainer to determine their ability to teach accurately and sufficiently. TPEs also assess weapon system, equipment or process knowledge; teaching methods and techniques; the ability to operate trainers; and adequacy and effectiveness of training programs. Any individual training personnel on a task or process is subject to a TPE.

3.6.2. Inspections. Represent inspections of equipment and processes, often through the use of functional checklists and other applicable checklists, to ensure compliance with established standards. Inspections are rated as “Pass” or “Fail”. A “Fail” assessment is defined as failing any major question/process or exceeding the AQL on the assessment checklist.

3.6.2.1. Quality Verification Inspection (QVI). A QVI is an inspection of equipment condition or a process after an inspection, repair action, or process has been completed by a technician or supervisor to assess if it was properly completed. The QVI finding should reflect deficiencies by the individual who accomplished the task and identify specific discrepancies.

3.6.2.2. Special Inspections (SI). SIs are inspections not covered by QVIs or evaluations and may include, but are not limited to, inspections of: equipment forms, document control procedures and file plans, consolidated tool kits, inventory controls, TO files, vehicle inspections, housekeeping, safety practices, and other interest items identified by Headquarters Air Force and MAJCOMs. SIs may be compliance or proficiency oriented.

3.6.3. Observations. Observations will encompass safety, security, tool usage, general maintenance practices, TO usage, nuclear surety, etc. Represents observed events or conditions with safety implications or technical violations not related to an evaluation or inspection that are considered unsafe, not in accordance with established procedures, or in the case of equipment, unfit to operate.

3.6.3.1. Detected Safety Violation (DSV). A DSV is an observed unsafe act by an individual. The QA evaluator must stop the unsafe act immediately. Do not document a separate DSV on an individual undergoing a direct evaluation since the unsafe act automatically results in a "Fail" rating. Annotate the failure with "Safety" when a safety violation is committed during an evaluation.

3.6.3.2. Technical Data Violation (TDV). A TDV is an observation of any person performing maintenance or another SCM process without the required technical data present at the job site and in use. The technician must have knowledge of all general directives associated with the job prior to performing the task. Do not document a separate TDV on an individual undergoing a direct evaluation since failure to use technical data automatically results in a "Fail" rating. Annotate the failure with "Tech Data" when a TDV is committed during an evaluation.

3.6.3.3. Unsatisfactory Condition Report (UCR). A UCR is an unsafe or unsatisfactory condition, other than a DSV, chargeable to the work center supervisor. UCRs will be documented even when it is not possible to determine who created the condition.

#### 3.6.4. Technical Orders Discrepancy Categories.

3.6.4.1. Category I (CAT I). A required inspection/TO procedural item missed or improperly completed. This category is a specific work card item or TO step, note, caution, or warning for that specific evaluated task. Use sub-classification of major or minor to indicate the discrepancy's relative severity.

3.6.4.2. Category II (CAT II). An obvious defect, which could have been readily detected by a technician or supervisor, but is not a specific work card item or TO step, note, caution, or warning for that specific evaluated task. Use sub-classification of major or minor to indicate the discrepancy's relative severity.

**3.7. QA Assessment Focus Areas.** Assessments will concentrate on the following areas: Compliance with Nuclear Surety Standards (if applicable); Qualified and Proficient Workforce; Compliance with TO, Instructions, Manuals, and Directives; Compliance and Management of Safety Programs; Facilities and Equipment Condition; and Asset Accountability. The QA Unit Report will group unit deficiencies in these focus areas.

3.7.1. Compliance with Nuclear Surety Standards (if applicable). Personnel at all levels are responsible for ensuring nuclear weapon systems, NWRM, Master Nuclear Certification Listing (MNCL), and Nuclear Certified Equipment (NCE) are safe, secure, and reliable. Ensure weapon system safety rules, owner/user security, and reliability standards are strictly adhered to. Nuclear surety is outlined in AFI 91-101 *Air Force Nuclear Weapons Surety Program* and defined as *materiel, personnel, and procedures which contribute to the security, safety, and reliability of nuclear weapons and to the assurance that there will be no nuclear weapon accidents, incidents, unauthorized weapon detonations, or degradation in performance at the target.*

3.7.2. Qualified and Proficient Workforce. Ensure a properly trained and qualified workforce is maintained to accomplish the mission. Commanders are responsible for ensuring unit personnel receive the proper training to accomplish the mission. Factors that impede the unit's ability to adequately achieve or maintain a qualified workforce should be identified to higher headquarters.

3.7.3. Compliance with TO, Instructions, Manuals, and Directives. Personnel at all levels are responsible and accountable for enforcing mandatory standards. Ensure all applicable TOs, instructions, manuals, and directives are complete, current, and used. This includes ensuring required forms and records are properly completed and maintained in accordance with applicable directives for any logistics-related activity. The following three sub-categories will be used to assess performance in this focus area and to facilitate trend analysis:

3.7.3.1. Human Factors: Internal/External situational elements that result in incorrect decision making processes (i.e. stress, time, distractions, complacency, etc...).

3.7.3.2. Inadequate Guidance: The governing guidance is incorrect or poorly stated leading to improper processes or actions (i.e. TOs, AFIs, Supplements, Operating Instructions (OI), Policy Letters, etc...).

3.7.3.3. Documentation: This category indicates a failure to properly document an action, process or task (i.e. removing/replacing component, appointment letters, training completion documentation, etc.)

3.7.4. Compliance and Management of Safety Programs. Personnel at all levels are responsible for minimizing risk to equipment and personnel.

3.7.5. Facilities and Equipment Condition. Supervisors at all levels are required to ensure adequate facilities and equipment required to accomplish the mission are available and properly maintained. Commanders are responsible for identifying facility and equipment conditions and shortfalls that impact mission accomplishment to the appropriate agency/higher headquarters.

3.7.6. Asset Accountability. Personnel at all levels are responsible for ensuring the accountability of tools, materiel, equipment, and weapons. This includes ensuring Positive Inventory Control (PIC) of nuclear weapons, nuclear weapon systems, NWRM, classified assets, Controlled Cryptographic Item/Communications Security (CCI/COMSEC), equipment, serialized control items, small arms, conventional munitions, and sensitive related materiel. It includes ensuring that accurate SCM data is reflected for the materiel in appropriate functional information management systems.

### **3.8. QA Assessment Procedures.**

3.8.1. The QA Section will notify the Commander and CM immediately of all major findings or failures related to safety, security, or nuclear surety. Additionally, the QA Section will suspense assessments receiving a "Fail", "DSV", "TDV", or "UCR" to the appropriate flight commander/superintendent for corrective action(s).

3.8.2. Work centers will respond to all findings by stating the action taken to resolve the identified problem(s) to include an "implementation date or estimated closure date." Root cause analysis will be conducted for all major findings (identified by the CM to determine underlying causes and appropriate corrective action. The QA Section can assist, but not be part of the RCA team, with conducting root cause analysis. Work center responses will be routed through the superintendent and flight commander before reaching the QA Section. Unit commanders/directors will be briefed on open/closed items monthly. Confirmation of

immediate corrections or planned corrective actions to resolve major findings or failures will be routed and returned to the CM within five duty days.

3.8.3. Evaluators must review all individuals' On-The-Job-Training (OJT) Records for evaluations receiving a "Fail", "DSV", or "TDV" to verify training documentation (i.e. have individuals been trained, etc.). Identify discrepancies in documentation to the unit training manager for follow-up action. At no time will the evaluation ratings be changed based on OJT Record documentation discrepancies alone.

3.8.4. Results of all assessments will be recorded in the QA database. **NOTE:** File maintenance can be done via hard copy or electronically in the QA database. If done electronically, ensure routine backups are accomplished.

3.8.5. All assessment findings (i.e. "Failed evaluation", "inspection", or "observations") will include a reference to the TO, Instruction, and/or command standard violated of each finding prior to the determination to include that finding in the QA database. Evaluators will review assessment results with the person(s) supervisor evaluated upon completion of each assessment.

3.8.6. Assessment Findings will be categorized into one of the six Assessment Focus Areas used in the Logistics Compliance Assessment Program (LCAP).

3.8.6.1. Assessment Findings are validated deficiencies and will be tracked at the unit level until resolved.

3.8.6.1.1. Major Finding. A deficiency that results or could result in widespread or significant mission impact or failure.

3.8.6.1.2. Minor Finding. A deficiency that is procedurally incorrect but only has minor mission impact.

### **3.9. Assessment Frequency.**

3.9.1. All SCM personnel must be assessed at least once each year. The CM will ensure the number of assessments will be equally allocated, as appropriate given the complexity of the assessment, for each week within the monthly time period.

3.9.2. Available personnel are those "on station" performing tasks – including augmenting forces. Individuals who are off station will not be counted.

3.9.3. Assessments must be conducted over all shifts, including weekends as applicable to the individual duty sections.

3.9.4. Assessments shall continue to be conducted during exercises, contingency operations, and file maintenance. Evaluators should make every effort to be unobtrusive.

### **3.10. Unit Annual Assessment.**

3.10.1. Procedures

3.10.1.1. The QA Section must evaluate each element within the AFGLSC annually (at least once each twelve months). The assessment team will consist of QA team and functional subject matter experts for each functional area. At the ESC/HNC, each element with supply chain responsibilities must be evaluated each year. The Commander may require more frequent visits.

3.10.1.2. Revisit unit not earlier than 60 days and no more than 120 days after initial visit to check each major finding found during the annual assessment.

3.10.1.3. Unit Annual Assessment Plan. The QA Section shall develop and maintain a schedule indicating the areas that will be visited and the proposed month of the visit. The QA Section will develop an assessment plan showing areas, types, and numbers of assessment that will be conducted and provide copies of the plan and schedule to all flights and Commanders.

3.10.1.4. When developing the plan, the CM will:

3.10.1.4.1. Address areas of concern identified by Commander(s) and unit leadership, Center QA, and CM.

3.10.1.4.2. Tailor the plan for each squadron.

3.10.1.4.3. Review, formalize and distribute the assessment plan.

3.10.1.5. Assessment must be conducted within 60 days (plus or minus) of the date of the previous year's assessment.

3.10.1.6. The Wing/Group CC has the option to waive the annual assessment for squadron scheduled the month before, during, and after a MAJCOM Logistics Compliance Assessment Program (LCAP) or Compliance Inspection (CI). This will provide the Commander/Director the flexibility needed to meet last-minute taskings and eliminate the duplication of LCAP/CI reports without diluting the effectiveness of the annual assessment program.

3.10.1.7. The Commander/Director shall have one or more qualified individuals from another flight perform annual assessment on the QA Section.

3.10.1.8. Unit Assessment Criteria. The QA Section shall use the standard functional LCAP checklists published at the HQ AFMC/A4 EIM SharePoint: <https://org.eis.afmc.af.mil/sites/HOAFMCA4/default.aspx> (Click on Community Sites / Quality Assurance). Compliance Inspection checklists are published on the Air Force Inspection Agency web page <https://webapps.afrc.af.mil/afia/home.aspx>. Additionally, Lead Commands may develop supplemental functional checklists from AF and Lead Command directives for use at the unit level. For assessment of technician proficiency and equipment condition, applicable technical data is the assessment standard. Local directives, additional checklists, and other methods may be added to conduct the assessment.

3.10.1.9. Prior to conducting the assessment, the QA evaluator shall discuss assessment areas, special items of concern and discrepancies from the last assessment with the element supervisor.

3.10.1.10. Assessment Exit Briefing. At the end of the assessment visit, conduct an exit briefing with the squadron. Thoroughly discuss all deficiencies and resolve differences of opinion.

3.10.1.11. Assessment Written Report. A detailed written report of the assessment shall be routed through the squadron within 10 workdays after the exit briefing. Include all

identified deficiencies, their main causes, and recommended changes. Be sure to identify repeat discrepancies and list the source of the original discrepancy.

3.10.1.12. Include training requirements in the report. Specify the type of training recommended. Provide the Training Section with a copy of all assessment reports that identify training requirements.

3.10.1.13. Replies to Assessment Reports. Replies are due to the QA Section within 30 workdays of the date of the report. Replies will contain all corrective and preventive actions taken and/or planned including the need for additional root cause analysis. Replies will indicate whether a discrepancy is closed (corrective action completed) or open. The writer of the reply should include the corrective action already taken and the estimated completion date (ECD). ECD should be actively monitored to ensure corrective action is completed in a timely manner.

3.10.1.14. Review of Replies. The QA Section will review replies. Replies should be adequate and completely present corrective and preventive actions. Provide approval, disapproval, and comments to the CM or Commander/Director.

3.10.1.14.1. The Chain of Command QA will review replies for corrective actions in non-located organizations.

3.10.1.15. Return replies to the appropriate squadron or work center for further action, if they are unacceptable.

3.10.1.16. File completed assessment reports and replies in the QA Section.

3.10.1.17. Report Handling. Reports generated are privileged documents. As such, the Air Force controls distribution. All reports generated under this program should be classified, released and distributed consistent with AFI 20-111, Para 4.5., *LCAP Report Handling*.

**3.11. Grading.** Units will receive an overall grade based on a five-tier grading scale (Outstanding, Excellent, Satisfactory, Marginal, and Unsatisfactory). The CM shall publish a final report of assessment findings, problem areas, and recommended improvements (as required), from the assessment for distribution to senior leaders and all inspected organizations.

3.11.1. The CM will assign ratings that accurately reflect observed performance and will use the described scoring methodology as the starting point for determining grades.

3.11.2. The five-tier Grading Scale is:

**Table 3.1. Grading Scale**

Outstanding	95 – 100%
Excellent	90 – 94.99%
Satisfactory	80 – 89.99%
Marginal	70 – 79.99%
Unsatisfactory	0 – 69.99%

**3.12. Scoring.** The overall score will be determined by calculating a baseline score and then deducting for penalties.

3.12.1. **Baseline Score.** The baseline score is calculated by dividing the total number of pass events by the total of all events. Events are defined as evaluations (paragraph 3.6.1) and Inspections (paragraph 3.6.2.). Do not include observations in the baseline score.

3.12.2. **Deductions.** Deductions are calculated by assessing a .5% penalty for each observation as defined in paragraph 3.6.3. and repeat QA findings. A repeat finding is defined as any identified “Major” finding from the previous Unit Annual Assessment.

## Chapter 4

### QA REPORTING REQUIREMENTS

**4.1. Annual Status Report.** HQ AFMC/A4US will submit an annual Status Report to HQ AFMC/A4R (FAM). The approved format will be posted to the HQ AFMC/A4 EIM SharePoint: <https://org.eis.afmc.af.mil/sites/HOAFMCA4/default.aspx> (Click on Community Sites / Quality Assurance).

4.1.1. The report will cover all assigned units within the command and include the following metrics: overall pass rate, PE pass rate, total number of DSVs, USVs, and UCRs, and overall grade awarded from quarterly status reports.

4.1.2. HQ AFMC/A4US will provide any recommendations on guidance that they believe need to be accomplished.

4.1.3. The annual report will run on the calendar year and will be due to HQ AFMC/A4R the last Monday in January.

**4.2. Quarterly Status Report.** AFGLSC and ESC/HNC will submit a quarterly status report to HQ AFMC/A4US. The AFMC/A4US approved format will be posted to the HQ AFMC/A4 EIM SharePoint: <https://org.eis.afmc.af.mil/sites/HOAFMCA4/default.aspx>. Click on Community Sites/Quality Assurance.

4.2.1. The report will cover the previous quarter's completed QA activity.

4.2.2. The report will highlight any trends and areas that required root cause analysis.

4.2.3. The report will be due January, April, July, and October.

4.2.4. AFGLSC will determine the Report format, as long as it clearly identified the required metrics.

**4.3. QA Monthly Report.** The CM will submit their QA Monthly Report to their Wing Commander, Group Commander, and/or Division Chief, and squadron commander. This report is a concise compilation of assessment results based on the completed monthly assessments.

4.3.1. The report will contain the following metrics: overall pass rate, PE pass rate, total number of DSVs, USVs, and UCRs, open discrepancies, root cause analysis, trends, training and recommendations. Additionally, this report will include the final determination of findings, and other information as determined by the unit leadership.

4.3.2. All failed assessments will include the applicable reference(s).

4.3.3. Compliance with current DoD, AF, MAJCOM, and Unit directives.

4.3.4. Units can submit a standardized PowerPoint Slide highlighting all the required metrics, as long as they have a written Discrepancy Report detailing the actual findings, readily available if requested.

**4.4. QA Monthly Summary Brief.** The QA Section will provide a monthly brief to the Group commander/Director and/or Division Chief.

4.4.1. Group commander/Director and/or Division Chiefs will determine Key Unit Leadership in attendance. This meeting is intended to be a summary of the QA monthly report.

4.4.2. A Report template for this Monthly Brief is located at the HQ AFMC/A4 EIM SharePoint located in the SCM Quality Assurance Folder: <https://org.eis.afmc.af.mil/sites/HQAFMCA4/default.aspx> (Click on Community Sites / Quality Assurance).

**4.5. QA Assessment Form.** The inspected flight must provide a written response to the QA section that has been routed through the Squadron Commander or designated representative on all documented major findings within 30 days using AF Form 4421.

4.5.1. Major findings and Trends recommended for closure must include root cause analysis and sufficient corrective action measures to prevent reoccurrence. If the finding remains open, units must state the corrective action already taken, the plan for final resolution, and the estimated completion date (ECD).

4.5.1.1. Root cause analysis techniques may be found in the *Air Force Smart Operations for the 21st Century Playbook, Volume B (Ver 2.0): Introduction to the Eight Step OODA Loop AFSO Problem Solving*, located on the Air Force Portal.

4.5.2. Squadrons/Flights will submit responses every 30 days to the QA Section until all findings have been closed.

#### **4.6. QA Report Handling.**

4.6.1. Classification. The QA Report must be marked in accordance with the security classification guide. Mark unclassified reports as “For Official Use Only” (FOUO) if they contain FOUO information as defined in AFI 31-401, *Information Security Program Management*.

4.6.2. Releasability. QA Reports are privileged documents and the Air Force controls their distribution. DoD members, DoD contractors, consultants, and grantees are permitted access to inspection reports IAW DoD Regulation 5400.7/Air Force Supplement. Non-DoD parties requesting inspection reports should be referred to the appropriate Freedom of Information Act (FOIA) office. The following statement must appear on the cover and in the body of each report: “For Official Use Only” (FOUO). This report contains internal matters that are deliberative in nature, are part of the agency decision-making process, and/or are otherwise legally privileged, each of which are protected from disclosure under the Freedom of Information Act, 5 U.S.C. §552 (2006). Do not release in whole or in part to persons or agencies outside the Air Force, nor can it be republished in whole or part in any publication not containing this statement, including Air Force magazines and general use pamphlets, without express approval of the Director of Logistics, AF/A4L.”

4.6.2.1. QA Reports may be released in whole or part within the DoD at MAJCOM A4 discretion. A summary of findings and facts may be released for inclusion in base and local newspapers. Do not release inter/intra-agency pre-decisional/deliberative material. Contact AF/A4L for approval to release reports in whole or in part outside the DoD.

4.6.2.2. All QA Reports marked in accordance with paragraph 4.6.1. will be maintained IAW AFMAN 33-363, Management of Records, and disposed of IAW Table 21-09 R

02.00, Quality Control Inspection/Evaluation Records, from the Air Force Records Disposition Schedule in the Air Force Records Information Management System (AFRIMS), <https://www.my.af.mil/afirms/afirms/afirms/rims.cfm>." Records should be destroyed IAW DoD 5200.1-R, Information Security Program, and IAW AFI 31-401, for classified material.

4.6.3. Distribution. The HQ AFMC/A4US QA Annual report(s) and the AFGSLC and unit's Quarterly report(s) will be posted on the HQ AFMC/A4 EIM SharePoint: <https://org.eis.afmc.af.mil/sites/HQAFMCA4/default.aspx>. (Click on Community Sites / Quality Assurance).

KATHLEEN D. CLOSE  
Major General, USAF  
Director of Logistics and Sustainment

**Attachment 1****GLOSSARY OF REFERENCES AND SUPPORTING INFORMATION*****References***

AFH 38-210, *Air Force Best Practices Clearinghouse*

AFI 20-111, *Logistics Compliance Assessment Program*

AFI 21-101, *Aircraft and Equipment Maintenance Management*

AFI 21-200, *Munitions and Missile Maintenance Management*

AFI 21-201, *Conventional Munitions Maintenance Management*

AFI 21-203, *Nuclear Accountability Procedures*

AFI 21-204, *Nuclear Weapons Maintenance Procedures*

AFI 24-203, *Preparation and Movement of Air Force Cargo*

AFI 31-101, *The Air Force Installation Security Program*

AFI 31-401, *Information Security Program Management*

AFI 33-360, *Publications and Forms Management*

AFI 90-201, *Inspector General Activities*

AFJMAN 23-210, *Joint Service Manual (JSM) for Storage and Materials Handling*

AFJMAN 23-215, *Reporting of Supply Discrepancies*

AFMAN 23-110, *USAF Supply Manual*

AFMAN 23-220, *Reports of Survey for Air Force Property*

AFMAN 24-204, *Preparing Hazardous Materials for Military Air Shipments*

AFMAN 33-363, *Management of Records*

AFMAN 91-201, *Explosive Safety Standards*

AFPD 16-14, *Information Protection*

AFPD 20-1, *Acquisition and Sustainment Life Cycle Management*

AFMCI 20-101, *Elimination of Duplication in the Management and Logistics Support of Interchangeable and Substitutable Items*

AFMCI 21-149, *Contract Depot Maintenance*

AFMCI 23-102, *Purchase Request/Military Interdepartmental Purchase Request (PM/MIPR) Operations*

AFMCI 23-109, *Applications, Programs, and Indentures*

AFMCI 23-120, *Execution and Prioritization Repair Support System (Express)*

AFMCI 90-202, *Command Level Inspector General Inspection Activities*

AFMCMAN 23-1, *Requirements for Secondary Items (D200A, D200N)*

AFMCMAN 23-3, *Cataloging and Standardization*

DoD 4000.25-1-M, *Military Standard Requisitioning/Issue Procedures (MILSTRIP) Manual*

DoD 4000.25-2-M, *Military Standard Transaction Reporting and Accountability Procedures (MILSTRAP)*

DoD 4100.39-M, Vol 4 *FLIS Procedures Manual*

DoD 4140.1-R, *DoD Supply Chain Materiel Management Regulation*

DoD 4145.19-R-1, *Storage and Materials Handling*

DTR 4500.9-R, *Defense Transportation Regulation*

DoD 5200.1-R, *Information Security Program*

DoDD 5210.2, *DoD, Access to and Dissemination of Restricted Data*

DoD 5220.22-M, *National Industrial Security Program Operating Manual (NISPOM)*

DoD 5220.22-R, *Industrial Security Regulation*

DoDI 8320.04 — *Item Unique Identifier (UII) Standards for Tangible Personal Property*

AF NWRM Positive Inventory Control Concept of Operations

AF NWRM Serial Item Management Plan

MIL-STD-129, *Military Marking for Shipment and Storage*

MIL-STD-2073-1, *Standard Practice for Military Packaging*

Air Force Smart Operations for the 21st Century Playbook, Volume B (Ver 2.0): *Introduction to the Eight Step OODA Loop AFSO Problem Solving*

OUSD/ATL Letter, 16 Oct 08, Subject: Nuclear Weapons-Related Materiel

AIR FORCE FORM 4421, *Logistics Readiness Squadron Quality Assurance Assessment Form*

AIR FORCE FORM 797, *Job Qualification Standard Continuation/Command JQS*

### ***Abbreviations and Acronyms***

**AEF**—Air & Space Expeditionary Force

**AF**—Air Force

**AFGLSC**—Air Force Global Logistics Support Center

**ALC**—Air Logistics Center

**AFI**—Air Force Instruction

**AFMAN**—Air Force Manual

**AFMC**—Air Force Materiel Command

**AFPD**—Air Force Policy Directive

**AFRIMS**—Air Force Records Information Management System

**AFRL**—Air Force Research Lab

**AQL**—Acceptable Quality Level  
**AFSO**—Air Force Smart Operations  
**CAP**—Corrective Action Plan  
**CCCA**—Common Core Compliance Area  
**CFETP**—Career Field Education and Training Plan  
**CI**—Compliance Inspection  
**CoP**—Community of Practice  
**CPSD**—Cryptologic Systems Division  
**DoD**—Department of Defense  
**DSV**—Detected Safety Violation  
**ECD**—Estimated Completion Date  
**EPE**—Evaluator Proficiency Evaluation  
**FAM**—Functional Area Manager  
**FOD**—Foreign Object Damage  
**FOUO**—For Official Use Only  
**HAZMAT**—Hazardous Material  
**IAW**—In Accordance With  
**IG**—Inspector General  
**IMT**—Information Management Tool  
**LCAP**—Logistics Compliance Assessment Program  
**MAJCOM**—Major Command  
**MICAP**—Mission Capable  
**NWRM**—Nuclear Weapons Related Materiel  
**OCR**—Office of Collateral Responsibility  
**OPR**—Office of Primary Responsibility  
**PE**—Personnel Evaluation  
**PIC**—Positive Inventory Control  
**QA**—Quality Assurance  
**QAE**—Quality Assurance Evaluator  
**QAP**—Quality Assurance Program  
**QEIP**—Quality Evaluation and Inspection Plan  
**QVI**—Quality Verification Inspection

**RCA**—Root Cause Analysis  
**RDS**—Records Disposition Schedule  
**RIL**—Routine Inspection List  
**SCMG**—Supply Chain Management Group  
**SCMW**—Supply Chain Management Wing  
**SCOG**—Supply Chain Operations Group  
**SCOW**—Supply Chain Operations Wing  
**SCM**—Supply Chain Management  
**SI**—Special Inspection  
**SII**—Special Interest Item  
**SIP**—Self-Inspection Program  
**SNCO**—Senior Noncommissioned Officer  
**TCTO**—Time Compliance Technical Order  
**TDV**—Technical Data Violation  
**TO**—Technical Order  
**TPE**—Trainer Proficiency Evaluation  
**UCR**—Unsatisfactory Condition Report

### *Terms*

**Assessment**— inspection, evaluation, or observation.

**Evaluations**—represent the direct evaluation of a SCM action, inspection, or training conducted/performed by an individual or team. Evaluations are used to evaluate job proficiency, degree of training, and compliance with technical data or instructions. Any individual performing, supervising, or evaluating SCM tasks is subject to a direct evaluation

**Personnel Evaluation**—the direct evaluation of an individual or team conducting/performing a SCM action. PEs may be conducted on task-oriented functions such as equipment maintenance as well as process-oriented functions such as MICAP processing.

**Evaluator Proficiency Evaluations**—the direct evaluation of a QA individual or any individual performing a quality/compliance assurance function in a unit.

**Trainer Proficiency Evaluations**—the direct evaluation of a unit instructor/trainer to determine their ability to teach accurately and sufficiently. TPEs also assess weapon system, equipment or process knowledge; teaching methods and techniques; the ability to operate trainers; and adequacy and effectiveness of training programs. Any individual training personnel on a task or process is subject to a TPE.

**Inspections**—represent inspections of equipment and processes, often through the use of functional checklists and other applicable checklists, to ensure compliance with established standards. Inspections are rated as “Pass” or “Fail”.

**Routine Inspection List (RIL)**—is an Unit developed list of routine inspections that must be performed.

**Quality Verification Inspection**—an inspection of equipment condition or a process after an inspection, repair action, or process has been completed by a technician or supervisor to assess if it was properly completed. The QVI finding should reflect deficiencies by the individual who accomplished the task and identify specific discrepancies.

**Special Inspections**—inspections not covered by QVIs or Evaluations and may include, but are not limited to, inspections of: equipment forms, document control procedures and file plans, consolidated tool kits, inventory controls, TO files, vehicle inspections, housekeeping, safety practices, FOD program, and other interest items identified by Headquarters Air Force and MAJCOMs. SIs may be compliance or proficiency oriented.

**Observations**—represents observed events or conditions with safety implications or technical violations not related to an evaluation or inspection that are considered unsafe, not in accordance with established procedures, or in the case of equipment, unfit to operate.

**Detected Safety Violation**—an observed unsafe act by an individual.

**Technical Data Violation**—an observation of any person performing maintenance or another SCM process without the required technical data present at the job site and in use.

**Unsatisfactory Condition Report**—an unsafe or unsatisfactory condition, other than a DSV, chargeable to the work center supervisor.

**Discrepancy Category I**—a required inspection/TO procedural item missed or improperly completed. This category is a specific work card item or TO step, note, caution, or warning for that specific evaluated task. Use sub-classification of major or minor to indicate the discrepancy's relative severity.

**Discrepancy Category II**—an obvious defect, which could have been readily detected by a technician or supervisor, but is not a specific work card item or TO step, note, caution, or warning for that specific evaluated task. Use sub-classification of major or minor to indicate the discrepancy's relative severity.

**Major Finding**—A deficiency that results or could result in widespread or significant mission impact or failure.

**Minor Finding**—A deficiency that is procedurally incorrect but only has minor mission impact.

## Attachment 2

### UNIT ANNUAL ASSESSMENT REPORT FORMAT

**A2.1. QA Report Format.** The QA Report will be provided to the squadron commander/division chief following the format described below. The report will contain, at a minimum, the following sections:

A2.1.1. Executive Summary: Provides a concise narrative of the overall assessment results for the unit. It shall include an overall unit score and comments shall be categorized into the appropriate Focus Area defined in paragraph 3.7 as applicable.

A2.1.2. QA Scores: Provides a summary of flight scores.

A2.1.3. Findings: Provides a complete listing of the failed assessments. All findings must include applicable references. The findings shall be categorized into one of the Focus Areas.

A2.1.4. Other Significant Findings: Provides a narrative of findings outside the scope of the QA assessment but significant enough to warrant MAJCOM and AF attention. These findings identify issues beyond the unit's ability to control or affect. They will not be included in the unit's score.

A2.1.5. **(Optional)** Recommended Improvement Areas. Provide a summary of processes, products, or capabilities which could be improved by a suggested course of action.

A2.1.6. **(Optional)** Unit Strengths. Provide a summary of unit strengths and positive processes observed during the assessment. The CM may identify potential Best Practices following the procedures contained in AFH 38-210, *Air Force Best Practices Clearinghouse*.

A2.1.7. **(Optional)** Outstanding Performers: The CM may elect to identify personnel or teams that demonstrate a superior level of professional excellence and personal responsibility.

## Attachment 3

## SAMPLE APPOINTMENT LETTER

Figure A3.1. Sample Appointment Letter



DEPARTMENT OF THE AIR FORCE  
 AIR FORCE MATERIEL COMMAND  
 AIR FORCE GLOBAL LOGISTICS SUPPORT CENTER

MEMORANDUM FOR AFGLSC

Date

FROM: 448 SCMW/CL

SUBJECT: Quality Assurance Evaluator Appointment

1. IAW AFMCI 20-2, Para. 2.4.3., the following individual has been appointed as the Quality Assurance Evaluator for the 448 SCMW:

<u>RANK</u>	<u>NAME</u>	<u>CLEARANCE</u>	<u>POSITION</u>	<u>DUTY PHONE</u>
GS-12	Ronald McDonald	Secret	1670-Equipment Specialist	884-1234

2. This letter supersedes previous letters, same subject

3. Questions regarding this subject can be directed to the Compliance Manager (CM) at DSN 884-2345.

John Smith, Col, USAF  
 448 SCMW/CL