		LOCALE (Check)
REPORT OF SECUI	RITY VIOLATION	REGIONAL CENTRAL OFFICE
INSTRUCTIONS		
<ol> <li>Section I is to be executed in duplicate by the Document Security Officer.</li> <li>Section II is to be executed in duplicate by the person responsible for a violation of the regulations pertaining to the safe-guarding of classified defense information.</li> <li>The completed original is then to be forwarded to the GSA Security Officer not later than one full working day after a security violation occurs or is reported to the Document Security Officer.</li> <li>Use reverse or additional sheets to continue explanations, if necessary.</li> </ol>		
SECTION I - VIOLATION		
NAME OF VIOLATOR	TITLE AND DUTY STATION OF VIOLATOR	
NATURE OF VIOLATION (State circumstances and facts relative to violation, including time, date and place; describe classified documents compromised or mishandled, and indicate agency of origin; describe actions or negligence of person involved or responsible; state what action has been taken to prevent such violation in the future.)		
SIGNATURE OF DOCUMENT SECURITY OFFICER		DATE
	N OF PERSON RESPONSIBLE FOR VIOLATION	
STATEMENT OF VIOLATOR		
SIGNATURE		DATE