

<b>NACDF IMAGERY RESEARCH REQUEST</b>		<b>1. REQUESTERS CONTROL NO.</b>	
<b>2. REQUESTER</b>		<b>3. DATE SUBMITTED</b>	
a. Name	b. Telephone Number		
c. Organization	<b>4. PROGRAM</b>		
		<b>5. DATE REQUIRED</b>	
<b>SERVICE REQUIREMENTS</b>			
<b>6. FILE</b>			
<input type="checkbox"/> a. AMPHI (Aerial)	<input type="checkbox"/> b. Ground/Handheld	<input type="checkbox"/> c. ACF (SAO)	
<b>7. SERVICE</b>			
<input type="checkbox"/> a. Computer Listing	<input type="checkbox"/> b. Graphic Plots	<input type="checkbox"/> c. Research and Selection	
<b>COMPUTER SEARCH PARAMETERS</b>			
<b>8. COUNTRY</b>		<b>9. CLASSIFICATION</b>	
		<input type="checkbox"/> a. ALL	<input type="checkbox"/> b. TSCW
		<input type="checkbox"/> c. Secret	<input type="checkbox"/> d. Unclassified
		<b>10. DATE RANGE</b>	
		a. From (Day, Month, Yr.)	b. To (Day, Month, Yr.)
<b>11. MISSION PROJECT OR SERIES</b>		<b>12. CLOUD FREE</b>	
		%	
<b>13. SUBJECT DESCRIPTION/COORDINATES</b> ( <input type="checkbox"/> a. Polygon <input type="checkbox"/> b. Circle = -NM Radius <input type="checkbox"/> c. Point)			