

| BRIEFING STATEMENT (USAREUR Suppl 1 to AR 380-5) | | Date |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|-------------|
| Agency | Subject Briefing Statements-Critical Nuclear Weapons Design Information | |
| Name (Last, first, MI) | Rank | Unit |
| Part I | | |
| <p>1. I acknowledge that I have been authorized to receive or hold critical nuclear weapons design information (CNWDI). I understand that the security of this information is of paramount importance and that unauthorized disclosure will endanger the United States.</p> <p>2. I understand that when I have a change in my assignment or duty which makes it no longer necessary for me to have access to critical nuclear weapons design information, I must execute a termination briefing statement.</p> <p>3. I am aware that I am subject to penalties under the Atomic Energy Act of 1954 and the United States Espionage Laws, US Code Title 18, if I discuss with or disclose CNWDI to a person not currently authorized to have such information.</p> | | |
| Date signed | Signature | |
| | Name | |
| Date signed | Signature | |
| | Name, rank, and title of witness | |
| Part II | | |
| I acknowledge that I am no longer authorized access to critical nuclear weapons design information. I certify that hereafter I will neither divulge nor discuss information that I have acquired as an authorized recipient, unless required to do so by a competent authority. | | |
| Date signed | Signature | |
| | Signature of witness | |
| | Name of witness | |