

DEPARTMENT OF DEFENSE CONTRACT SECURITY CLASSIFICATION SPECIFICATION				1. CLEARANCE AND SAFEGUARDING			
<i>(The requirements of the DoD Industrial Security Manual apply to all security aspects of this effort)</i>				a. FACILITY CLEARANCE REQUIRED SECRET			
				b. LEVEL OF SAFEGUARDING REQUIRED NONE			
2. THIS SPECIFICATION IS FOR: (X and complete as applicable)			3. THIS SPECIFICATION IS FOR: (X and complete as applicable)				
<input checked="" type="checkbox"/>	a. PRIME CONTRACT NUMBER DAAE07-00-D-M051			a. ORIGINAL (Complete date in all cases)	Date (YYMMDD) 20000301		
	b. SUBCONTRACT NUMBER		<input checked="" type="checkbox"/>	b. REVISED (Supersedes all previous specs)	Revision No. 004	Date (YYMMDD) 20030311	
	c. SOLICITATION OR OTHER NUMBER	DUE Date (YYMMDD)		c. FINAL (Complete Item 5 in all cases)		Date (YYMMDD)	
4. IS THIS A FOLLOW-ON CONTRACT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO. If Yes, complete the following: Classified material received or generated under _____ (Preceding Contract Number) is transferred to this follow-on contract.							
5. IS THIS FINAL DD Form 254? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO. If Yes, complete the following: In response to the contractor's requested dated _____, retention of the identified classified material is authorized for the period of _____.							
6. CONTRACTOR (Include Commercial and Government Entity (CAGE) Code)							
a. NAME, ADDRESS, and ZIP CODE GM GDLS Defense Group, L.L.C. 14920 23 MILE ROAD SHELBY TOWNSHIP, MI 48315			b. CAGE CODE INLE2	c. COGNIZANT SECURITY OFFICE (Name, Address, and Zip Code) Defense Security Service Industrial Security Field Office 17177 N. Laurel Park Drive, Suite 417 Livonia, MI 48152			
7. SUBCONTRACTOR							
a. NAME, ADDRESS, AND ZIP CODE			b. CAGE CODE	c. COGNIZANT SECURITY OFFICE (Name, Address, and Zip Code)			
8. ACTUAL PERFORMANCE							
a. LOCATION			b. CAGE CODE	c. COGNIZANT SECURITY OFFICE (Name, Address, and Zip Code)			
9. GENERAL IDENTIFICATION OF THIS PROCUREMENT Development, Production, and Supply Support for the STRYKER Family of Vehicles							
10. THIS CONTRACT WILL REQUIRE ACCESS TO:		YES	No	11. IN PERFORMING THIS CONTRACT, THE CONTRACTOR WILL:		YES	NO
a. COMMUNICATIONS SECURITY (COMSEC) INFORMATION		<input checked="" type="checkbox"/>		a. HAVE ACCESS TO CLASSIFIED INFORMATION ONLY AT ANOTHER CONTRACTOR'S FACILITY OR A GOVERNMENT ACTIVITY			<input checked="" type="checkbox"/>
b. RESTRICTED DATA			<input checked="" type="checkbox"/>	b. RECEIVE CLASSIFIED DOCUMENTS ONLY		<input checked="" type="checkbox"/>	
c. CRITICAL NUCLEAR WEAPON DESIGN INFORMATION			<input checked="" type="checkbox"/>	c. RECEIVE AND GENERATE CLASSIFIED MATERIAL		<input checked="" type="checkbox"/>	
d. FORMERLY RESTRICTED DATA			<input checked="" type="checkbox"/>	d. FABRICATE, MODIFY, OR STORE CLASSIFIED HARDWARE			<input checked="" type="checkbox"/>
e. INTELLIGENCE INFORMATION				e. PERFORM SERVICES ONLY			<input checked="" type="checkbox"/>
(1) Sensitive Compartmented Information (SCI)			<input checked="" type="checkbox"/>	f. HAVE ACCESS TO U.S. CLASSIFIED INFORMATION OUTSIDE THE U.S. PUERTO RICO, U.S. POSSESSIONS AND TRUST TERRITORIES		<input checked="" type="checkbox"/>	
(2) Non-SCI			<input checked="" type="checkbox"/>	g. BE AUTHORIZED TO USE THE SERVICES OF DEFENSE TECHNICAL INFORMATION CENTER (DTIC) OR OTHER SECONDARY DISTRIBUTION CENTER			<input checked="" type="checkbox"/>
i. SPECIAL ACCESS INFORMATION			<input checked="" type="checkbox"/>	h. REQUIRE A COMSEC ACCOUNT		<input checked="" type="checkbox"/>	
g. NATO INFORMATION			<input checked="" type="checkbox"/>	i. HAVE TEMPEST REQUIREMENTS			<input checked="" type="checkbox"/>
f. FOREIGN GOVERNMENT INFORMATION			<input checked="" type="checkbox"/>	j. HAVE OPERATIONS SECURITY (OPSEC) REQUIREMENTS		<input checked="" type="checkbox"/>	
i. LIMITED DISSEMINATION INFORMATION			<input checked="" type="checkbox"/>	k. BE AUTHORIZED TO USE THE DEFENSE COURIER SERVICE			<input checked="" type="checkbox"/>
j. FOR OFFICIAL USE ONLY INFORMATION		<input checked="" type="checkbox"/>		l. OTHER (Specify)			
k. OTHER (Specify) Collateral Secret		<input checked="" type="checkbox"/>					

12. PUBLIC RELEASE. Any information (classified or unclassified) pertaining to this contract shall not be released for public dissemination except as provided by the Industrial Security Manual or unless it has been approved for public release by appropriate Government authority. Proposed public releases shall be submitted for approval prior to release.

Direct Through (Specify):

Program Manager, Brigade Combat Team, ATTN: SFAE-GCS-BCT/MS325, WARREN, MI 48397-5000 to TACOM G2 TO TACOM Public Affairs Office, U.S. Army Tank-automotive and Armaments Command (TACOM), Warren, MI 48397-5000

THREE Copies of Video along with explanation of video content. Three (3) paper copies and one (1) electronic copy on disk with full text must be provided at least sixty (60) days prior to the requested release date.

13. SECURITY GUIDANCE: The Security classification guidance need for this classified effort is identified below. If any difficulty is encountered in applying this guidance or if any other contributing factor indicates a need for changes in this guidance, the contractor is authorized and encouraged to provide recommended changes; to challenge the guidance or the classification assigned to any information or material furnished or generated under this contract; and to submit any questions for interpretation of this guidance to the official identified below. Pending final decision, the information involved shall be handled and protected at the highest level of classification assigned or recommended. (Fill in as appropriate for the classified effort. Attach, or forward under separate correspondence, any documents/guidelines/extracts reference herein. Add additional pages as needed to provide complete

ITEM 10j. "FOR OFFICIAL USE ONLY" (FOUO) is not a classification marking. It identifies unclassified DoD information that is exempt from public disclosure. It must not be given general circulation without receiving public release authority in accordance with Block 12, above. FOUO information will be marked, transmitted, safeguarded and disposed of in accordance with DoD Reg. 5400.7, dated September 1998.

ITEM(s) 10a, 11b, c, and h: These requirements are included in the DD254 for the purpose of Flow-down from the JV to the Subcontractor(s). These requirements are not supported at the JV facility. The JV is a Non-possessing facility.

ITEM 11j: OPSEC requirements IAW the NISPOM and the IAV Program Protection Plan Dated Sept 2001.

ADDITIONAL REQUIREMENTS:

- 13a. Reports of loss, compromise or suspected compromise shall be provided to the PM BCT Security Manager and TACOM G2 within 24 hours of the incident, in addition to the reporting requirements to DSS outlined in the NISPOM.
- b. The Contractor Facility Security Officer (FSO) will facilitate the passage of Sensitive But Classified (SBU)/Controlled Unclassified Information (CUI) and Classified Military Information (CMI) material to the sub-contractors on a need to know basis. This will require the obtaining of appropriate licenses or Technical Assistance Agreement (TAA) from the US State Dept.
- c. Classified elements of this program are covered in the Security Classified Guide for the STRYKER Family of vehicles dated Sept 2001 w/Int Chg 1. The SCG also refers to associated SCG's that are to be adhered to.
- d. All of the above security requirements will flow down to any subcontractors supporting this contract on a need to know basis.
- e. The JV FSO will ensure that all security measures req'd IAW the NISPOM are in place with any sub-contractor prior to releasing classified data to them.
- f. The contractor shall ensure that US Army security requirements, to include the appropriate SCG(s), are flowed down to their subcontractors who are involved in BCT efforts. A copy of all DD Forms 254 issued to subcontractors performing BCT work will be provided to the PM BCT Security Manager and PCO.
- g. The PM Security Manager for Security Related Information can be reached at 586-753-2033.

14. ADDITIONAL SECURITY REQUIREMENTS. Requirements, in addition to ISM requirements, are established for this contract. (If Yes, identify the pertinent contractual clauses in the contract document itself, or provide an appropriate statement which identifies the additional requirements. Provide a copy of the requirements to the cognizant security office. Use Item 13 if additional space is needed.)

Yes No

15. INSPECTIONS. Elements of this contract are outside the inspection responsibility of the cognizant security office. (If Yes, identify specific areas or elements carved out and the activity responsible for inspections. Use Item 13 if additional space is needed.)

Yes No

16. CERTIFICATION AND SIGNATURE. Security requirements stated herein are complete and adequate for safeguarding the classified information to be released or generated under this classified effort. All questions shall be referred to the official named below.

a. TYPED NAME OF CERTIFYING OFFICIAL Sandra E. McCarroll	b. TITLE Contracting Officer	c. TELEPHONE (810) 753-2072
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d. ADDRESS (Include Zip Code) PEO GCS, PM BCT ATTN: SFAE-GCS-BCT/325 Warren, MI 48397-5000	17. REQUIRED DISTRIBUTION
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e. SIGNATURE 	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 20px; text-align: center;"><input checked="" type="checkbox"/></td><td>a. CONTRACTOR</td></tr> <tr><td style="text-align: center;"><input type="checkbox"/></td><td>b. SUBCONTRACTOR</td></tr> <tr><td style="text-align: center;"><input checked="" type="checkbox"/></td><td>c. COGNIZANT SECURITY OFFICE FOR PRIME AND SUBCONTRACTOR</td></tr> <tr><td style="text-align: center;"><input checked="" type="checkbox"/></td><td>d. U.S. ACTIVITY RESPONSIBLE FOR OVERSEAS SECURITY ADMINISTRATION</td></tr> <tr><td style="text-align: center;"><input checked="" type="checkbox"/></td><td>e. ADMINISTRATION CONTRACTING OFFICER</td></tr> <tr><td style="text-align: center;"><input checked="" type="checkbox"/></td><td>f. OTHERS AS NECESSARY:</td></tr> </table>	<input checked="" type="checkbox"/>	a. CONTRACTOR	<input type="checkbox"/>	b. SUBCONTRACTOR	<input checked="" type="checkbox"/>	c. COGNIZANT SECURITY OFFICE FOR PRIME AND SUBCONTRACTOR	<input checked="" type="checkbox"/>	d. U.S. ACTIVITY RESPONSIBLE FOR OVERSEAS SECURITY ADMINISTRATION	<input checked="" type="checkbox"/>	e. ADMINISTRATION CONTRACTING OFFICER	<input checked="" type="checkbox"/>	f. OTHERS AS NECESSARY:
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