



Leadership Excellence

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Leaders for Life

U.S. Army Cadet Command

Desktop Guide for Group Movement Request (GMR)





US Army Cadet Command Group Movement Request



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- 1. All Group Movement Request (GMR) must be routed through Brigade to US Army Cadet Command G4 Acquisition Division.**
- 2. All Group Movement Request (GMR) must be received by the G4 Acquisition Division NLT 30 days prior to the scheduled movement/departure date.**
- 3. All Group Movement Request (GMR) must have 3 quotes. A statement of non-availability is considered a valid quote.**
- 4. All quotes must be from the DoD approved bus listing for commercial group travel.**
<https://www.defensetravel.dod.mil/site/bus.cfm>
- 5. DoD approved bus vendor must be used for all commercial travel to include payment with a Government Purchase Card (GPC).**
- 6. A DD Form 1341, Report of Commercial Carrier Passenger Service, must be completed and submitted NLT 48 hours after the event.**

US Army Cadet Command

Group Movement Request (GMR) Flow Process

Brigade S4 submits requirement packet to appropriate G4 Acquisition Analyst.

***G4 must receive request at least 30 Calendar Days prior to requested start date.**

Packet should include:

-[USACC Form 112](#)

* Median quote must be used for funding in block 9.

-[Group Movement Request \(GMR\)](#)

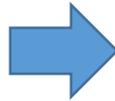
-3 Quotes (DOD Approved Bus Listing)

<https://www.defensetravel.dod.mil/site/bus.cfm>

-[Transportation Matrix](#)- if required

*[Letter of Lateness](#) w/BDE

Commander's signature (if submitted within 10 working days of start date)



G4 Acquisition Analyst reviews packet for accuracy/completeness.

-Returns to BDE if incomplete or discrepancies.



G4 Acquisition Analyst forwards complete packet to appropriate G8 Budget Analyst and G4 Logistics Management Specialist (USACC Fleet Manager).

-G8 Budget Analyst reviews & assigns funding; sends GMR packet to LRC (**EXCEPT Form 112**) for processing. G8 will also copy furnish GSA Fleet Manager when forwarding GMR to LRC.



LRC processes request, if request has to be returned to USACC for any reason, **it will be returned to the G4 Logistics Division, NTV Fleet Manager Logistics Management Specialist.**



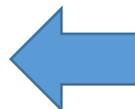
LRC selects commercial carrier and provide USACC G4 Fleet Manager awarded confirmation letter.



USACC Fleet Manager provides Brigade S4 with [Awarded Carrier Confirmation Letter](#) & [DD Form 1341, Report of Commercial Carrier Passenger Service](#).

Brigade will forward all awarded documentation to requesting Battalion to review for accuracy.

NOTIFY G4 FLEET MANGER OF ANY CHANGES OR ISSUES WITH AWARDED GMR. REQUEST FOR CHANGES WITH THE VENDOR WILL BE COORDINATED ONLY BY THE LRC.



Battalion forward copies of the completed DD Form 1341 NLT 24 hrs. after the return scheduled event to their Brigade S4

Brigade S4 will forward copy of the DD Form 1341 NLT 48 hrs. after the scheduled training to event to USACC G4 Fleet

GROUP MOVEMENT COMMERCIAL TRANSPORTATION REQUEST

NOTE: COMPLETE GROUP MOVEMENT REQUEST (GMR) PACKETS MUST BE SUBMITTED TO US ARMY CADET COMMAND G4 ACQUISITIONS NLT 30 DAYS PRIOR TO THE SCHEDULED MOVEMENT DATE. IF SUBMITTED WITHIN 10 BUSINESS DAYS PRIOR TO THE SCHEDULED EVENT; A MEMORANDUM OF LATENESS, SIGNED BY THE BRIGADE COMMANDER, MUST ACCOMPANY THE PACKET.

A. UNIT INFORMATION

DATE: _____
 UNIT: _____ EXERCISE NAME: _____
 POINT OF CONTACT: _____
 PHONE: _____ FAX: _____ EMAIL: _____

B. MODE OF TRAVEL: COMMERCIAL AIR: _____ COMMERCIAL BUS _____ BOTH _____

C. GOING:

PASSENGERS: _____
 PICK-UP LOCATION: _____
 COMPLETE ADDRESS _____
 REQUESTED DEPARTURE DATE/TIME (PICK-UP LOCATION): _____
 DESTINATION: _____
 COMPLETE ADDRESS _____
 REQUESTED ARRIVAL DATE/TIME (DESTINATION): _____
 WEAPONS**: YES: ___ NO: ___ EXCESS BAGGAGE**: YES: ___ NO: ___ #PIECES: _____

D.

IS BUS REQUIRED TO REMAIN WITH UNIT? Yes: _____ No: _____
 * If Yes- Does Bus Driver need Overnight Lodging and Per Diem? Yes: _____ No: _____

E. RETURN:

PASSENGERS: _____
 PICK-UP LOCATION: _____
 COMPLETE ADDRESS _____
 REQUESTED DEPARTURE DATE/TIME (PICK-UP LOCATION): _____
 DESTINATION: _____
 COMPLETE ADDRESS _____
 REQUESTED ARRIVAL DATE/TIME (DESTINATION): _____
F. WEAPONS: YES: ___ NO: ___ **G. EXCESS BAGGAGE:** YES: ___ NO: ___ #PIECES: _____

H. REQUESTOR SIGNATURE: _____

I. FUNDING:

FUND CITE: _____
ESTIMATED COST: _____
FUNDING AUTHORIZATION SIGNATURE: _____

INSTRUCTIONS FOR COMPLETING GROUP MOVEMENT REQUEST (GMR).

A. Requesting Unit Information:

- Date: Date Completed
- Unit: Requesting Battalion
- POC: Point of contact
- Phone: Commercial and Cell Phone number
- FAX: If applicable
- Exercise Name: Name of the training event
- Email: POC email address (CIV/MIL or EDU).

B. Mode of Travel: Requested means of Group Movement.

C. Going:

- # of Passengers: Total number of passenger requesting movement (Cadets & Cadre).
- Pick-up location: Physical address of pick-up location (Street address, City, State, Zip code).
- Destination: Physical Address of your Destination (Street address, City, State, Zip code).
- Requested Departure date and time: Request movement date (day/month/year) and departure time.
- Requested Arrival time: Requested arrival time at your destination (day/month/year) and arrival time.

D. Is bus required to remain with unit?

- If yes- Does the bus driver required lodging and per diem? If yes- please have all cost associated with the move reflected in the provided quotes.

E. Return:

- # of Passengers: Total number of passenger requesting movement (Cadets & Cadre).
- Pick-up location: Physical address of pick-up location (Street address, City, State, Zip code).
- Destination: Physical Address of your Destination (Street address, City, State, Zip code).
- Requested Departure date and time: Request movement date (day/month/year) and departure time.
- Requested Arrival time: Requested arrival time at your destination (day/month/year) and arrival time.

F. Weapons:

- Check Yes or No

G. Excess Baggage: (Standard baggage consist of: one suitcase or duffel bag and one carry-on).

- Check Yes or No. If Yes - total number of extra bags per individual.

H. Requestor Signature:

- Group Movement POC. This is the final step.

STOP! US Army Cadet Command G8 will complete block "I" and forward to 407th LRC Passenger Movements.

QUOTES: All group movement request must have three (3) quotes submitted. All quotes must be from the DoD approved Commercial Bus listing at:

<https://www.defensetravel.dod.mil/Docs/BusAgreementPOCs.pdf>.

If any of the three (3) quotes are non-attainable; a statement of non-availability, or email from the vendor stating so, must be submitted with the packet.

REQUEST FOR SUPPLIES AND SERVICES				
(For use of this form, see USACC PAM XX-XX (pending). Proponent agency is ATCC-LMA.				
1. ACTIVITY: DeSoto High School JROTC	2. REQUEST DATE: 11/02/2018	3. UNIT DODAAC: W901BG	4. DELIVERY DATE: 01/24/2019	
5. LOCAL PURCHASE AUTHORITY: CCR 145-2	6. QUANTITY: 1	7. UNIT OF ISSUE: EA	8. UNIT PRICE: \$4,875.00	9. TOTAL PRICE: \$4,875.00
10. DESCRIPTION OF SUPPLIES OR SERVICES: Transportation to and from Ft. Benning, Georgia for a staff ride for Desoto High School. The bus will pick up 55 cadets/ chaperones & instructors at Desoto High School, 1710 E. Gibson St., Arcadia, Florida, 34266 on January 24, 2019 at 1200hrs and proceed to Best Western Plus-Columbus North, 4027 Veterans Court, Columbus GA 31909 for overnight lodging. Bus will stop for dinner en route. The bus will depart Ft. Benning at 1600 hrs on January 25, 2019 and will return to Desoto High School, 1710 E. Gibson Street, Arcadia, FL 34266 at approximately 2400hrs. Bus will stop for dinner en route.				
11. REQUIRED FOR AND/OR SPECIAL INSTRUCTIONS: None				
12. RECOMMENDED SOURCE: Annett Bus lines 130 Madrid Drive Sebring, Florida 33876 Tel: 1-800-282-3655 Fax: 1-863-655-6207 DUNS: 073241747		13. SHIP TO LOCATION: 24 January 2019, 1200 hrs, Pick up at 1710 E. Gibson St., Arcadia, Florida and deliver to Best Western Plus-Columbus North, 4027 Veterans Court, Columbus GA 31909 25 January 2019, 0600 hrs, transport from 4Best Western Plus-Columbus North, 4027 Veterans Court, Columbus GA 31909 to and around Ft. Benning, Georgia and return to 710 E. Gibson St., Arcadia, Florida.		
14. FUND CITE AND BUDGET ANALYST SIGNATURE:				
15. POINT OF CONTACT AND PHONE NUMBER: 1SG(R) Timothy Edsall 941-979-7649		16. COMMANDER AND/OR DIRECTOR APPROVAL (SIGNATURE): James Knauff, Chief, JROTC 6th Brigade (912) 315-4513 KNAUFF.JAMES.ELDON.JR.1122257920 <small>Digitally signed by KNAUFF.JAMES.ELDON.JR.1122257920 Date: 2018.12.18 10:03:21 -0500</small>		
17. ADDITIONAL APPROVAL (SJA):		18. ADDITIONAL APPROVAL (PBO):		
19. ADDITIONAL APPROVAL:		20. ADDITIONAL APPROVAL (GPC BILLING OFFICIAL):		
21. HAND RECEIPT HOLDERS NAME, UIC AND SIGNATURE:		22. REQUISITION NUMBER:		



DEPARTMENT OF THE ARMY
2ND BRIGADE, UNITED STATES ARMY CADET COMMAND
BUILDING 5213, MARYLAND AVENUE
FORT DIX, NJ 08640-5240

OFFICE SYMBOL

DATE

MEMORADUM FOR Director, 407th Logistics Readiness Center (ASCW-LKN), 201 6th Avenue, Ft. Knox, KY 40121.

SUBJECT: Late Submission of Group Movement Request (GMR).

1. Reference:

a. Standard Operating Procedure (SOP), 407th Logistics Readiness Center Passenger Movements, 29 Aug 18, subject: Submission of Group Movement Request.

2. _____ Brigade is requesting an exception to the ten (10) business days rule for processing group movement request in support of _____ College or University.

3. Brief explanation on why the group movement request is being submitted within the 10 business day rule.

4. Point of contact for this memorandum is the undersigned.

XXXXX XXXXX
COL, LG
Commanding

REPORT OF COMMERCIAL CARRIER PASSENGER SERVICE

(Prescribed by DTR 4500.9-R)

1. SCHEDULED PAX 97		2. ACTUAL PAX 97		3. DATE (YYYYMMDD) 20181026		4. CAM/MAIN/MRO NUMBER		5. PSRO NUMBER		
6. NAME OF ORIGIN ACTIVITY BISON BN BUCKNELL UNIVERSITY					7. NAME OF DESTINATION ACTIVITY FORT INDIANTOWN GAP, ANNVILLE, PA					
8. GROUP LEADER					9. DESTINATION TRANSPORTATION OFFICER TELEPHONE NUMBER			10. DUTY OFFICER TELEPHONE NUMBER 570-577-1008		
a. NAME (Last, First, Middle Initial) FOSSE, PAUL J.			b. RANK/GRADE CPT / O-3							
c. UNIT/COMMAND NAME 2ND BDE BISON BN			d. TELEPHONE NUMBER 570-389-5311		11. NAME OF AIR CARRIER/BUS COMPANY SUSQUEHANNA TRAILWAYS LLC					
e. UNIT/COMMAND ADDRESS (Include ZIP Code) 1 ROTC DRIVE, SPRATT HOUSE, LEWISBURG, PA 17837					12. ORIGIN LEWISBURG, PA		13. DESTINATION ANNVILLE, PA			
14. AIR CARRIER PASSENGER SERVICE (X as applicable)					15. COMMERCIAL BUS SERVICE (X as applicable)					
AREAS TO BE RATED		UNSATISFACTORY	MARGINAL	SATISFACTORY	VERY SATISFACTORY	EXCELLENT	AREAS TO BE RATED		YES	NO
a. Check-in convenience		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	a. Interior and exterior of bus cleaned.		<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Courtesy of passenger agents		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	b. Lavatory clean and functional with sufficient tissue, towels, soap, and water, if applicable.		<input checked="" type="checkbox"/>	<input type="checkbox"/>
c. Flight information display		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	c. Equipped with first aid kit.		<input checked="" type="checkbox"/>	<input type="checkbox"/>
d. Promptness in boarding aircraft		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	d. Clean headrest covers supplied for each seat.		<input checked="" type="checkbox"/>	<input type="checkbox"/>
e. Baggage handling		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	e. Overhead rack space provided for coats, hats, and parcels.		<input checked="" type="checkbox"/>	<input type="checkbox"/>
f. Meal service		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	f. Temperature controlled so as to ensure passenger comfort regardless of outside temperature.		<input checked="" type="checkbox"/>	<input type="checkbox"/>
g. Aircrew courtesy		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	g. Lighting adequate to service needs of individual passengers.		<input checked="" type="checkbox"/>	<input type="checkbox"/>
h. Aircraft cleanliness		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	h. Carrier personnel neat, courteous, and helpful.		<input checked="" type="checkbox"/>	<input type="checkbox"/>
i. Aircraft cabin temperature		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	i. Carrier arranged for clean and sanitary meal stops. Meals consisted of good quantity, quality, and variety.		<input type="checkbox"/>	<input checked="" type="checkbox"/>
j. Announcements (Timing, Clarity, Content)		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	j. Meal stops made during specified meal hours.		<input type="checkbox"/>	<input checked="" type="checkbox"/>
k. Arrival timeliness		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	k. During movement, bus operator briefed person in charge concerning irregular events and reasons for delay.		<input checked="" type="checkbox"/>	<input type="checkbox"/>
l. Flight safety		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	16. REMARKS (Continue on back if necessary) i. No meal stops needed k. No planned meal stops			
m. Overall flight rating		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				



DEPARTMENT OF THE ARMY
LOGISTICS READINESS CENTER
201 6TH AVENUE, SUITE 156
FORT KNOX, KENTUCKY 40121-5217

REPLY TO
ATTENTION
OF:

ASCW-LKN-T

08 JAN 19

MEMORANDUM FOR: WINDSTAR LINES, INC.
SUBJECT: Confirmation Letter

(712)-792-4221

This office has authorized a charter bus movement with your company.
The following information is provided:

MRN: 2019010301

University of Northern Iowa

PICK UP ADDRESS: 2488 West Street, Dubuque, IA 52001

PICK UP DATE: 29 MAR 19 SPOT TIME: 0630

ITO REMARKS:

DROP ADDRESS: Building 4573 – Service Road, Camp Dodge, IA 50131

PASSENGER COUNT: 40 BUSES REQUIRED: 1

RETURN INFORMATION

PICK UP ADDRESS: Building 4573 – Service Road, Camp Dodge, IA 50131

PICK UP DATE: 31 MAR 19 SPOT TIME: 0930

ITO REMARKS:

DROP ADDRESS: 2488 West Street, Dubuque, IA 52001

PASSENGER COUNT: 40 BUSES REQUIRED: 1

TOTAL COST OF MOVE: \$2,935.50

TOTAL BUSES USED: 2

BAGS PER PASSENGER: 2

UNIT POC: Michael Harrison

PHONE: (315) 286-4379

TRAVEL CLERK: Leslie Bastian email: USARMY.KNOX.407-AFSB.MBX.LRC-PPPS-SCHEDULING@MAIL.MIL

This office has authorized a charter bus movement with your company. Please fax invoice or Government Charter Coach Certificate to this office for payment. Request acknowledgement of the Charter Confirmation via fax (502) 624-3315 or email. The information contained in this document was generated by LTS for use by the U.S. Government.

ALL CHANGES TO THIS MOVE MUST GO THROUGH THIS OFFICE.

TA FOR TO:

Horace W. Bowden
Installation Transportation Officer
LRC, Fort Knox, KY

✓

[CLICK HERE TO RETURN TO FLOW PROCESS](#)

EXERCISE: CAMP SUCCESS, WASHINGTON DC HS ISD	
3535 V ST N.E. 20018	

50	TOTAL # of CADETS
8	TOTAL # of CADRE
58	TOTAL # of PAX

SCHOOL INFORMATION & NUMBER OF PASSENGERS

	SCHOOL NAME	STREET ADDRESS	CITY	STATE	ZIP CODE	TELEPHONE #	# of CADETS	# of CADRE
1	Forest Park HS	15721 Forest Park Drive	Woodbridge	VA	22193	(202) 480-0908	25	4
1	Woodbridge HS	3001 Old Bridge Road	Woodbridge	VA	22192	(202) 480-0908	25	4

DEPARTURE INFORMATION

CAMP SUCCESS JROTC PROGRAMS

18 JULY 2018 TRANSPORTATION PLAN (GOING)

BUS #	STOP 1	TIME	STOP 2	TIME	STOP 3	TIME	STOP 4	TIME
1	Woodbridge HS	10:30am	Forest Park HS	11:00am	Fort AP Hill	2:00pm		

RETURN INFORMATION

CAMP SUCCESS JROTC PROGRAMS

23 JUNE 2018, TRANSPORTATION PLAN (RETURN)

BUS #	STOP 1	TIME	STOP 2	TIME	STOP 3	TIME	STOP 3	TIME
1	Fort AP Hill VA	11:00am	Forest Park HS	2:00pm	Woodbridge HS	3:00pm		