

<b>TRAFFIC ACTIVITY REPORT</b> (TRADOC Reg 55-3)	PERIOD ENDING	REQUIREMENTS CONTROL SYMBOL ATBO-23(R3)
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TO Commander US Army Training and Doctrine Command ATTN: ATBO-HT Fort Monroe, VA 23651-5000	FROM
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**SECTION A - PERSONAL PROPERTY MOVEMENTS**

	OUTBOUND	INBOUND	REWEIGHS ORDERED
1. International (Intl) household goods (HHG) shipments over 2000 lbs			
2. Unaccompanied (unacmp) baggage shipments over 100 lbs			
3. Domestic HHG shipments over 500 lbs and Intl HHG shipments 500 to 2000 lbs			
4. Unacmp baggage shipments less than 100 lbs and HHG shipments less than 500 lbs			
5. Total items 1 thru 4 outbound shipments (less Direct Procurement Method [DPM] )			
6. DPM Shipments			
7. Do-It-Yourself (DITY)			
8. House trailer/mobile homes			
9. Local Drayage moves			
10. Nontemporary storage (NTS) lots			
11. Total number of inspections/weighings witnessed (excluding claims)			
12. Claims inspections _____			
13. Percent of total eligible shipments inspected/weighings witnessed _____			
14. Reweigh data (total number of pounds difference when destination weight is less than origin weight)			
a. Intl Govt bills of lading _____	b. Domestic (Codes 1, 2) _____		

**SECTION B - FREIGHT MOVEMENTS**

15. Commercial forms/bills of lading processed for outbound shipments	
a. Number _____	b. Total Pounds _____
16. Government Bills of Lading processed	
a. Outbound: Number _____	Tons _____
b. Inbound: Number _____	Tons _____

**SECTION C - PASSENGER MOVEMENTS**

	OUTBOUND	INBOUND
17. Number of groups processed		
18. Total number of passengers in all groups		
19. Number of persons processed as individual travelers		
20. Total number of individuals processed (items 18 & 19)		

**SECTION D - REMARKS**

(Comments on trends, major deviations, significant problems. Attach additional sheets.)

NAME AND TITLE OF SUPERVISOR RELEASING REPORT	OFFICE CODE AND AUTOVON TELEPHONE NUMBER	DATE
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# INSTRUCTIONS FOR COMPLETING TRADOC FORM 406-R

## SECTION A — PERSONAL PROPERTY MOVEMENTS.

**Items 1 thru 3.** Enter number of shipments in each category and number of shipments for which REWEIGHS were ORDERED.

**Items 4 thru 10.** Enter number of shipments in each category as indicated.

**Item 11.** Enter total number of witnessed weighings/inspections accomplished (excluding claims).

**Item 12.** Enter the total number of claims inspections conducted.

**Item 13.** Enter the percent (%) of witnessed weighings/inspections accomplished for the total of all eligible categories (lines 1-6 and 8-10) of personal property shipments.

**Item 14.** Enter the total weight resulting from reweighs of shipments where the destination weight was less than the origin weight.

## SECTION B — FREIGHT MOVEMENTS.

**ITEM 15.** Enter the number of commercial forms and bills of lading processed and the total weight expressed in POUNDS.

**ITEM 16.** Enter the number of Government bills of lading processed and the total weight expressed in TONS.

## SECTION C — PASSENGER MOVEMENTS.

**ITEM 17.** Enter the number of groups processed.

**ITEM 18.** Enter the number of passengers in all groups.

**ITEM 19.** Enter number of persons processed as individual travelers.

**ITEM 20.** Enter total number of individuals processed (Items 18 and 19).

## SECTION D — REMARKS.

Enter any information required for explanation, e.g., why inspection or reweigh requirements were not met, or to advise of problems being experienced in connection with this report.