CONTROL FORM FOR DOE DIRECTIVE

PART A (To be completed by the ORO DIRECTIVES MANAGEMENT GROUP, AD-440):

1. **DIRECTIVE NUMBER, TITLE, AND DATE:**

   DOE M 205.1-8, CYBER SECURITY INCIDENT MANAGEMENT MANUAL, dated 01/08/2009

2. **PURPOSE OF TRANSMITTAL:** _X_ New Directive ___ Revised Directive ___ Revised Control Form

3. **DOES THIS DIRECTIVE CANCEL OR EXTEND ANY OTHER DIRECTIVES?** ___ Yes _X_ No
   If "Yes," list what action (cancel or extend) and list the Directive(s) number(s), title(s), and date(s):

The attached Directive is forwarded for review and action. Complete Part B and forward a completed hard copy of this form to ORO DMG, AD-440, by **01/27/2009**.

PART B (To be completed by the DIVISION OF PRIMARY INTEREST [DPI]):

COMPLETE FOR DOE DIRECTIVES:

4. **CONTRACTOR APPLICABILITY.**

   Does this Directive affect the work performed by ORO Contractors? _X_ Yes ___ No

   If "Yes," whom?

   _X_ Bechtel Jacobs Company LLC
   _X_ ORAU
   _X_ UT-Battelle, LLC
   _X_ ISOTEK (Bldg. 3019, ORNL)
   _X_ EnergX
   _X_ Wackenhut (WSI)
   ___ Other Contractors (list by name)
   _X_ Protection Strategies Inc. (PSI)

5. **SUBJECT MATTER EXPERT**: Qui Nguyen (Name) AD-41 (Organization)

6. **APPROVED BY**: *Original Signed By* C. A. Spoons, Dir. (Signature) Information Resources Management Div., AD-41 (Organization) 01/23/2009 (Date)

PART C (To be completed by the ORO DIRECTIVES MANAGEMENT GROUP, AD-440):

APPROVED FOR DISTRIBUTION IN ACCORDANCE WITH OFFICIAL DIRECTIVE DISTRIBUTION LIST:

Original Signed By
Wayne H. Albaugh 01/26/2009
DMG Team Leader, AD-440 Date

INSTRUCTIONS TO ADDRESSEES: THIS FORM IS TO BE FILED WITH THE DIRECTIVE AND RETAINED. (Revised 01/02/2009)