

METRIC

MIL-PRF-10436M
AMENDMENT 1
31 July 2001

PERFORMANCE SPECIFICATION
COMPASS, MAGNETIC, UNMOUNTED:
LENSATIC, LUMINOUS, 5 DEGREE AND 20 MIL
GRADUATIONS, WITH CARRYING CASE

This amendment forms a part of MIL-PRF-10436M, dated 15 September 1998, and is approved for use by all Departments and Agencies of the Department of Defense

Page 1, Footer Box

Change from "U.S. ARMY TOPOGRAPHIC ENGINEERING CENTER, ATTN: CETEC-TD-T," to "U.S.ARMY ENGINEER RESEARCH AND DEVELOPMENT CENTER, TOPOGRAPHIC ENGINEERING CENTER, ATTN: CEERD-TS".

Page 13, Paragraph 6.2.1

Page 14, Paragraph 6.2.3

Page 14, Paragraph 6.5.2

Page 15, Paragraph 6.8.1

Change "U.S. Army TMDE Activity, ATTN: AMSMI-TMDE-DR, 10115 Duporttail Road, Suite 136, Fort Belvoir, VA 22060-5847" to "U.S. Army Communications-Electronics Command, Directorate for Safety, ATTN: AMSEL-SF-RE, Fort Monmouth, NJ 07703-5024".

Page 15, Line 9

Change "Upon completion of tests, the U.S. Army TMDE Activity will...." to "Upon completion of tests, the Directorate for Safety will...."

DD Form 1426

Replace existing DD Form 1426, STANDARDIZATION DOCUMENT IMPROVEMENT PROPOSAL, (last page of document, not numbered) with new DD Form 1426 on next page of this amendment.

AMSC N/A

FSC 6605

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MIL-PRF-10436M, AMD 1

Custodian:
Army – CE3
AF - 99
Navy – MC

Preparing activity
Army - CE3

Project 6605-0519

STANDARDIZATION DOCUMENT IMPROVEMENT PROPOSAL

INSTRUCTIONS

1. The preparing activity must complete blocks 1, 2, 3, and 8. In block 1, both the document number and revision letter should be given.

2. The submitter of this form must complete blocks 4, 5, 6, and 7, and send to preparing activity.

3. The preparing activity must provide a reply within 30 days from receipt of the form.

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I RECOMMEND A CHANGE:

1. DOCUMENT NUMBER
MIL-PRF-10436M. AMD 1

2. DOCUMENT DATE (YYYYMMDD)
2001/07/31

3. DOCUMENT TITLE COMPASS, MAGNETIC, UNMOUNTED: LENSATIC, LUMINOUS, 5 DEGREE AND 20 MIL GRADUATIONS, WITH CARRYING CASE

4. NATURE OF CHANGE *(Identify paragraph number and include proposed rewrite, if possible. Attach extra sheets as needed.)*

5. REASON FOR RECOMMENDATION

6. SUBMITTER

a. NAME *(Last, First, Middle Initial)*

b. ORGANIZATION

c. ADDRESS *(Include ZIP Code)*

d. TELEPHONE *(Include Area Code)*
(1) Commercial
(2) DSN
(If applicable)

7. DATE SUBMITTED
(YYYYMMDD)

8. PREPARING ACTIVITY

a. NAME
ERDC, TOPOGRAPHIC ENGINEERING CENTER

d. TELEPHONE *(Include Area Code)*
(1) Commercial (2) DSN
(703) 428-6862 328-6862

b. ADDRESS *(Include ZIP Code)*
ATTN: CEERD-TS
7701 TELEGRAPH ROAD
ALEXANDRIA, VA 22315-3864

IF YOU DO NOT RECEIVE A REPLY WITHIN 45 DAYS, CONTACT:
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