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C/S Series 53RH

SHORT HI-LO TA ASSESSMENT C/S

This is the basic prepared list used by Auditors to get a TA up or down into normal range. A GF Method 5 may also be used after TA is in normal range to get pc's case handled better.

		PC Name		D	ate
to spi	the pc, watching the meter.	Mark any A C/S 5	Tic	lown the list calling off the s c, SF, F, LF, LFHD (to what TA should be reassessed and all re),
A.	Interiorization Went in Go in Can't get in Want to get out Kicked out of spaces Can't go			Loss Lost Same thing run twice Same action done by another auditor Doing something with mind	
Β.	List errors Overlisting Wrong items Upset with giving items to auditor Wrong Why Wrong Indication Wrong PTS Item			between sessions Some other practice Word Clearing errors Study errors False TA Wrong sized cans Tired hands Dry hands or feet	
c.	Some sort of W/H Are you withholding something Is another withholding some- thing from you Are others withholding some- thing from others Has another committed overts on you Have you committed any overts Have others committed overts on others		J.	Wet hands or feet Loosens can grip Auditor overwhelming Feel attacked Something wrong with F/Ns Overrun F/Ns Missed F/N Items really didn't read Bad auditing Incomplete actions	
	Not saying Problems Protest Don't like it			Can't have Low Havingness PTS	
	Audited over out ruds Feel sad Rushed Tired ARC Brk Upset Can't get it		Μ.	Suppressed Something went on too long Went on by a release point Overrun Auditor kept on going Over-repair Puzzled by auditor keeps on Stops	
D.	Drugs ISD Alcohol Pot			Something else Physically Ill	
E.	Medicine Engram in restimulation Same engram run twice Can't see engrams too well Invisible Black		0.	Repairing a TA that isn't hig Repairing a TA that isn't low Faulty Meter Nothing wrong.	n

A. If A or any of the A Group, and the pc has had an Int RD, do an Int RD Correction List, and handle the reads. (HCOB 29 Oct 71 Amended 31 Dec 71.)

If pc has never had an Int RD, then give him a standard Int RD providing you have checked out on the Int-Ext pack and are good at R3R.

B. If any of these read, do an L4B on the earliest lists you can find that have not been corrected. Lacking these do an L4B in general. You can go over an L4B several times handling each read to F/N until the whole L4B gives nothing but F/Ns. Handle a Wrong Why or Wrong Indication or Wrong PTS Item per C/S Series 78.

C. If any of these, handle with 2wc and earlier similar to F/N. If more than one reads do biggest read first and then clean up each of the others E/S to F/N. If all read on assessment you have to get an F/N for each or 17 F/Ns. On overts and withholds, get what, and E/S to F/N. On out ruds, find which rud and handle. (See GF40RR HCOB 30 June 71 Revised 13 Jan 72.) Feel sad, handle the ARC Break. (Feel sad = ARC Brk of long duration.)

D. Rehab releases on each "drug" taken to F/N. Complete the Drug RD per C/S Series 48R after handling all reads on this assessment. If pc has had a Drug RD, do L3RD on it, and handle.

E. If any of these, do LSRD and handle according to what is stated to do on LSRD.

F. Clean up any protest and inval and rehab to F/N.

G. Find out what it is. If Yogi or Mystic exercises or some such 2wc E/S it to first time dons, find out what upset had occurred before that and if TA now down do LLC on that period of pc's life.

H. If Word Clearing, do a Word Clearing Correction List, handle all reads. If Study errors, 2wc E/S to F/N, and add a Study Correction List to the pc's program.

I. False TA is wrong cans. Use HCOBs 24 Oct 71, 12 Nov 71, 15 Feb 72, 18 Feb 72, 29 Feb 72, HCOB 23 Nov 73, all on False TA. Then clean up the bypassed charge with (1) Assess for best read (a) TA worries (b) F/N worries. (2) Then 2wc times he was worried about (item) E/S to F/N. (3) Rehab any overruns due to False TA obscuring F/Ns.

J. These are auditor errors. Low TA is generally caused by overwhelming TRs and incomplete actions. A high TA can be caused by an auditor overrunning F/Ns or failing to call them. Or trying to assess through an F/N and mistaking an F/N right swing for a read. An F/N can be obscured and mistaken for a read if Sensitivity too high. These items are all 2wc E/S to F/N. Auditors who made them need Cramming badly or retread.

K. Can't have or Hav. Find correct Havingness process and remedy.

L. PTS or Suppressed. Check for SP or get a full PTS RD.

M. Find out what. Clean up any protest. Rehab to F/N on each (or date to blow, locate to blow if qualified).

N. 2wc to find what. Note BD item. If BD item covered by one of these categories handle per instructions. If not just 2wc to F/N and get further C/S instructions for handling if necessary.

0. Get pc to tell you about it briefly. If correct then indicate to F/N. Go E/S and indicate if no F/N on first. If false TA handle per I above.

General. Handle Int RD (A) if it reads at all before handling rest as nothing will go right if Int is still out. For the remainder prefer to handle any BD group if you get a BD. If in doubt about what to do, return to the C/S.

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