

KEY CONTROL REGISTER AND INVENTORY

For use of this form see AR 190-11; the proponent agency is ODCSOPS

UNIT/ACTIVITY	PERIOD COVERED
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KEY CONTROL NUMBER(S) (Insert serial number or other identifying number from the key)

1.	11.	21.	31.
2.	12.	22.	32.
3.	13.	23.	33.
4.	14.	24.	34.
5.	15.	25.	35.
6.	16.	26.	36.
7.	17.	27.	37.
8.	18.	28.	38.
9.	19.	29.	39.
10.	20.	30.	40.

KEY ISSUE AND TURN IN

KEY NUMBER	ISSUED (Date/Time)	ISSUED BY (Printed Name/Signature)	ISSUED TO (Printed Name/Signature)	TURNED IN (Date/Time)	RECEIVED BY (Printed Name/Signature)

KEY ISSUE AND TURN IN (Continued)

KEY NUMBER	ISSUED (Date/Time)	ISSUED BY (Printed Name/Signature)	ISSUED TO (Printed Name/Signature)	TURNED IN (Date/Time)	RECEIVED BY (Printed Name/Signature)

INVENTORIES (JOINT/SEMIANNUAL)

DATE	PRINTED NAME/SIGNATURE	DATE	PRINTED NAME/SIGNATURE