

ORGANIZATIONAL CONTROL RECORD FOR EQUIPMENT

For use of this form, see DA PAM 750-8; the proponent agency is DCS G-4.

DATE (YYYYMMDD)	PAGE NO.	NO. OF PAGES
-----------------	----------	--------------

DISPATCHER

OFFICIAL USER <i>a</i>	REPORTING POINT <i>b</i>	PHONE EXT. NUMBER <i>c</i>	TIME TO REPORT <i>d</i>	EXPECT TIME OF RETURN <i>e</i>	DESTINATION <i>f</i>	UNIT IDENTIFICATION NUMBER <i>g</i>	TYPE OF EQUIPMENT <i>h</i>	REGISTRATION NUMBER <i>i</i>	OPERATOR'S NAME AND GRADE <i>j</i>	TIME		REMARKS <i>m</i>
										OUT <i>k</i>	IN <i>l</i>	