

NAME (Last, First, Initial) AND SERVICE NUMBER  
(If available, addressograph plate may be used)

Gwazdauskas Francis C.  
45 52 772-215

ORGANIZATIONAL CLOTHING AND EQUIPMENT RECORD  
(AR 735-33)

Use pencil for authorized allowance, sizes, and balances; ink for remaining entries. Acknowledge all transactions with signature in appropriate numbered columns.

ARTICLES ORGANIZATIONAL CLOTHING QUARTERMASTER	AUTHORIZED ALLOWANCES	SIZE	ISSUES (Date)								TURN-INS (Date)					BALANCE		
			1	2	3	4	5	6	7	8	1	2	3	4	5			
APRON, BAKER, BUTCHER AND COOK		19 Ac S																
CAP, FIELD, COTTON																		
CAP, FIELD, PILE																		
CAP, BAKERS AND COOKS																		
COATS, BAKERS AND COOKS																		
COAT, MAN'S, SATEEN, OG 107																		
DRESS, WOMEN'S, COOKS AND BAKERS																		
DRESS, WM'S CTN																		
GLOVES, LEATHER, HEAVY																		
GLOVES, WORK, COTTON																		
GLOVE-INSERTS, WOOL																		
GLOVE-SHELL, LEATHER																		
HOOD, WINTER, SATEEN, OG 107																		
LINER, COAT, MANS																		
OVERCOAT, MAN'S, W REM, LINER																		
OVERSHOES																		
PONCHO, LIGHTWEIGHT W/HOOD																		
SCARF, MAN'S, WOOL, OD																		
SHIRT, FIELD, WOOL																		
SHIRT, HBT, WOMEN'S SPECIAL																		
SHOES, ATHLETIC																		
SHORTS, ATHLETIC, POPLIN																		
STOCKINGS, COTTON																		
SWEATER																		
SUPPORTERS, ATHLETIC																		
SUSPENDERS, TROUSERS																		
TROUSERS, BAKERS AND COOKS																		
TROUSERS, FIELD, WOOL																		
TROUSERS, HBT, WOMEN'S SPECIAL																		
TROUSERS, WOMEN'S OUTER COVER																		
TROUSERS, SHELL, FIELD																		
TROUSERS, WOMEN'S, WOOL, LINER																		
WAIST, WOOL, WOMEN'S																		

*Francis C. Gwazdauskas*

INDIVIDUAL MUST ACKNOWLEDGE ISSUES AND AN OFFICER MUST ACKNOWLEDGE TURN-INS BY SIGNING AT RIGHT IN APPROPRIATE COLUMNS.

SIGNATURE OF INDIVIDUAL

SIGNATURE OF OFFICER





POST, CAMP AND STATION EQUIPMENT	AUTHORIZED ALLOWANCES	ISSUES (Date)								TURN-INS (Date)					BALANCE	
		17 Dec 67	18 Dec 67													
		1	2	3	4	5	6	7	8	1	2	3	4	5		
BLANKET, WOOL		/	/													
COT, FOLDING		/	/													
COVER, MATTRESS		/	/													
LOCKER, BOX		/	/													
MATTRESS, COTTON		/	/													
PILLOW		/	/													
PILLOW CASE		/	/													
SHEET, COTTON		/	/													
LOCKER, CLOTHING		/	/													
BEDSTEAD		/	/													
<b>OTHER SERVICES</b>																
MASK, PROTECTIVE, FIELD <i>M17</i> (chem)		/	/													
RIFLE <i>M16 #139949</i> (ord)		/	/													
CARBINE (ord)		/	/													
PISTOL (ord)		/	/													
BAYONET, KNIFE (ord)		/	/													
SCABBARD (ord)		/	/													
WATCH, WRIST (ord)		/	/													
<i>Magazines</i>		/	15													
<p>INDIVIDUAL MUST ACKNOWLEDGE ISSUES AND AN OFFICER MUST ACKNOWLEDGE TURN-INS BY SIGNING AT RIGHT IN APPROPRIATE COLUMNS.</p>		SIGNATURE OF INDIVIDUAL								SIGNATURE OF OFFICER						
THIS IS A		<input type="checkbox"/> TRUE COPY		<input type="checkbox"/> TRUE CERTIFIED CONSOLIDATION		<input type="checkbox"/> INITIAL ISSUE		<input type="checkbox"/> PHYSICAL INVENTORY								
ARM OR SERVICE		GRADE		OFFICER (Signature)												