

295 MacPherson Supply Request Form

Date: _____

Name: _____

Rank: _____

Phone Number: _____

MALE FEMALE

EXCHANGE LOST

- | | |
|-------------------------------------|--|
| <input type="checkbox"/> Boots | <input type="checkbox"/> Gloves |
| <input type="checkbox"/> Socks | <input type="checkbox"/> Touque |
| <input type="checkbox"/> Pants | <input type="checkbox"/> Rank & Slip-Ons |
| <input type="checkbox"/> Tunic | <input type="checkbox"/> Turtleneck |
| <input type="checkbox"/> Black Belt | <input type="checkbox"/> PT Shirt |
| <input type="checkbox"/> Shirt | <input type="checkbox"/> PT Shorts |
| <input type="checkbox"/> Tie | <input type="checkbox"/> PT Shoes |
| <input type="checkbox"/> Wedge | <input type="checkbox"/> Tilly Hat |
| <input type="checkbox"/> Parka | |

Please describe the problem with the uniform part you wish to exchange or have lost.
For example, if your boots are too small, shirt too tight, etc.

Please enter your current size here.

Please submit this form to the Supply Officer.

<i>(Office Use Only)</i>		Date Rec'd _____
Item Turned In?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Item Exchanged?	<input type="checkbox"/> Yes <input type="checkbox"/> No	