

**COMSEC
MATERIAL REPORT**

This form is FOR OFFICIAL USE ONLY unless otherwise stamped.

1. (X one) TRANSFER INVENTORY DESTRUCTION HAND RECEIPT OTHER (Specify)

F R O M	2. ACCT. NO.	3. DATE OF REPORT (Year, Month, Day)	4. OUTGOING NUMBER
		5. DATE OF TRANSACTION (Year, Month, Day)	6. INCOMING NUMBER

T O	7. ACCT. NO.	8. ACCOUNTING LEGEND CODES* 1 - Accountable by serial number. 2 - Accountable by quantity. 3 - Initial receipt required, locally accountable by serial number thereafter, local accounting records must be maintained for a minimum of 90 days after supersession. 4 - Initial receipt required, may be controlled in accordance with Service/ Agency directives.
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9. SHORT TITLE/DESIGNATOR - EDITION	10. QUANTITY	11. ACCOUNTING NUMBERS		12.* ALC	13. REMARKS
		BEGINNING	ENDING		
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14. THE MATERIAL HEREON HAS BEEN (X one) RECEIVED INVENTORIED DESTROYED

15. AUTHORIZED RECIPIENT 16. (X one) WITNESS OTHER (Specify)

a. Signature	b. Grade	a. Signature	b. Grade
c. Typed or Stamped Name	d. Service	c. Typed or Stamped Name	d. Service

17. FOR DEPARTMENT OR AGENCY USE