

REPORT ALL MISHAPS AND HAZARDS

TO YOUR:

NAME AND DUTY PHONE NUMBER

SUPERVISOR

OR, IF NECESSARY, TO ONE OF THE FOLLOWING

UNIT SAFETY REP

OR

ALT SAFETY REP

**HOST or WING
SAFETY OFFICE**

LOCAL USE (Enter below any additional guidance needed to satisfy local requirements)

HURLBURTFIELDVA91-3, 30 November 2016

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APPROVED BY: Mr. Kevin L. Ennis, USAF

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