

Form WI-1

Weapons Inspection Report of _____ Company, _____ Battalion, Capt. _____

	Number Inspected	Number Rejected	Number Repaired	Number Passed	Comments
Revolvers and Pistols					
Muskets - All					
Rifles - Breachloading					
Carbines - Breachloading					
Musketoons:					
Other Weapons (specify):					
Ammunition					
Sword Scabbards					
Bayonet Scabbards					

Signature: Orderly Sergeant

Signature: Company Commander

Date:

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Signature: Orderly Sergeant

Signature: Company Commander

Date: