FORT CAMPBELL SIGN-OUT LOG FOR HAZARDOUS MATERIAL

(For use of this form see CAM Reg 200-1. The proponent of this form is DPW-EDPP)

ACTIVITY:	LOCKER#	DATE:

NAME OF INDIVIDUAL	PRODUCT NAME	NATIONAL STOCK NUMBER (NSN)	LOCKER LOCATION	DATE SIGNED	QUANTITY SIGNED	QUANTITY CONSUMED	I HAVE READ THE MSDS/SDS

ALL PRODUCTS MUST BE RETURNED TO THE FLAMMABLE STORAGE LOCKER BY THE END OF THE DUTY DAY