

Unit Drug Testing Register

1. Unit/Commander/Email Address:										2. UPL Printed Name/Phone/Email Address:				3. Date Specimen Collected			4. Unit ID Code (UIC)				
														YYYY:			W <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>				
														MM:			5. Base Area Code				
														DD:			P106				
6. Batch and Specimen #		7. SERVICE MEMBER'S ID NUMBER (CAC)										8. Test Basis	9. Rank	10. Soldier's Printed Name		11. Observer's Printed Name		12. Comments/Remarks			
														Soldier's Signature		Observer's Signature					
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	2																				
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