

FORM WI -2

Weapons Inspection Report of _____ Battalion _____ Brigade, Col.
 _____ Commanding.

		Revolvers and Pistols			Muskets & Rifles			Carbines			Other			Ammunition			Sabers			Cylinders		
		# Inspected	# Rejected	# Repaired	# Passed	# Inspected	# Rejected	# Repaired	# Passed	# Inspected	# Rejected	# Repaired	# Passed	# Inspected	# Rejected	# Repaired	# Passed	# Inspected	# Rejected	# Repaired	# Passed	
Officers																						
Field Officers																						
Staff																						
1st Company																						
-																						
2nd Company-																						
3rd Company-																						
4th Company-																						
5th Company-																						
6th Company-																						
7th Company																						
-																						
8th Company-																						
other																						
other																						
other																						
TOTALS																						

Signed: (Battalion Adj. or Safety officer) _____ Date _____ Battalion
 Commander _____