REPORT OF INSPECTION ON _____ OPERATIONAL RATIONS
(ENTER TYPE OF RATION)

PART I - INSPECTION ACTIVITY INFORMATION

INSPECTOR:	**DATE OF INSPECTION:**
SECTION:	**BRANCH:**
ACTIVITY:	**REGION:**

PART II – INSPECTED UNIT INFORMATION

INSTALLATION:	**UNIT NAME:**
STORAGE LOCATION OF RATIONS:	**RATIONS RECEIVED FROM:**

PART III – RATION ASSEMBLER INFORMATION

CONTRACT NUMBER: ___NA	**ASSEMBLER:**

PART IV – INSPECTION INFORMATION

CLASS OF INSPECTION:	**TYPE OF INSPECTION:** ___ROUTINE ___SPECIAL

TYPE OF INSPECTION LOT:

___GRAND ____CONTRACTORS/ASSEMBLERS

LOT SIZE:

LOT INFORMATION:

PART V – INSPECTION RESULTS

CONDITION CODE: ___A ___B ___C ___H ___J ___L	**NEXT INSPECTION DUE:**
SPECIAL INSPECTION REQUIRED: ___NO ___YES	**TTI STATUS:** ___0 ___1 ___2 ___3 ___4 ___5 ___NA ___MISSING
STORAGE CONDITION: ___REFRIGERATED ___NON-REFRIGERATED	**STORAGE TEMPERATURE:** ___<80*F ___>80*F ___UNKNOWN
OVERRIDE SPECIAL INSPECTION:	**OVERRIDE AUTHORIZED BY:**
JUSTIFICATION OF OVERRIDE:	

PART VI - SAMPLING PLANS

RATION COMPONENT (SPECIAL ONLY)	DEFECT TABLE	SAMPLING TABLE	SAMPLE SIZE	DEFECT CLASS	ACTION NUMBER	TOTAL DEFECTS	DEFECTS BY COMPONENT CLASSIFICATION
							PRIMARY - SECONDARY - ANCILLARY - N/A
							PRIMARY - SECONDARY - ANCILLARY - N/A
							PRIMARY - SECONDARY - ANCILLARY - N/A
							PRIMARY - SECONDARY - ANCILLARY - N/A
							PRIMARY - SECONDARY - ANCILLARY - N/A
							PRIMARY - SECONDARY - ANCILLARY - N/A
							PRIMARY - SECONDARY - ANCILLARY - N/A
							PRIMARY - SECONDARY - ANCILLARY - N/A
							PRIMARY - SECONDARY - ANCILLARY - N/A

PART VII – NONCONFORMANCE SUMMARY

ASSEMBLER LOT NO.	MENU NO.	COMPONENT & CODE	COMPONENT PROCESSOR	DEFECT TABLE	DEFECT NO.	DEFECT CODE	DESCRIPTION OF DEFECTS/REMARKS	Primary			Secondary			Ancillary			N/A
								A	B	M	A	B	M	A	B	M	

* A = MAJ A, B = MAJ B, M = MINOR, N/A = Items with no Component Classification (Primary, Secondary, Ancillary)

DEFECT TOTALS

PART VIII - NARRATIVE COMMENTS

PART IX – SIGNATURE BLOCK

NAME / SIGNATURE OF INSPECTOR	DATE	NAME / SIGNATURE OF SUPERVISOR	TELEPHONE NO.	DATE