

WATCH ITEM WORKSHEET			FILE CODE		DATE
1. ADDRESSEES					
A. FROM			B. TO		
2. SUBJECT					
A. BRIEF DESCRIPTION OF CONDITION			B. CATEGORY <input type="checkbox"/> SUSPECTED DEFICIENCY <input type="checkbox"/> POTENTIAL ENHANCEMENT <input type="checkbox"/> REPEAT		C. SOURCE SELECTION SENSITIVE <i>(Protect IAW AFR 70-51)</i> <input type="checkbox"/> YES <input type="checkbox"/> NO
3. WATCH ITEM NUMBER			4. DATE DISCOVERED		
5. NATIONAL STOCK NUMBER <input type="checkbox"/> UNK <input type="checkbox"/> NA			6. NOMENCLATURE <input type="checkbox"/> UNK <input type="checkbox"/> NA		
7. MANUFACTURER, SHIPPER, OR OVERHAULER <input type="checkbox"/> UNK <input type="checkbox"/> NA			8. MANUFACTURER'S PART NO. <input type="checkbox"/> UNK <input type="checkbox"/> NA		
9. SERIAL, LOT, OR BATCH NO. <input type="checkbox"/> UNK <input type="checkbox"/> NA			10. CONTRACT, PURCHASE ORDER, OR DOCUMENT NO. <input type="checkbox"/> UNK <input type="checkbox"/> NA		
11. ITEM IS <input type="checkbox"/> NEW <input type="checkbox"/> OVERHAULED <input type="checkbox"/> UNK <input type="checkbox"/> NA			12. DATE MANUFACTURED, REPAIRED, OR OVERHAULED <input type="checkbox"/> UNK <input type="checkbox"/> NA		
13. OPERATING TIME AT FAILURE <input type="checkbox"/> UNK <input type="checkbox"/> NA			14. GOVERNMENT FURNISHED MATERIAL <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> UNK		
15. QUANTITY			16. ITEM WORKS ON OR WITH		
A. RECEIVED	B. INSPECTED	C. DEFICIENT <input type="checkbox"/> UNK <input type="checkbox"/> NA	A. END ITEM	B. NEXT HIGHER ASSEMBLY	
17. DOLLAR VALUE <input type="checkbox"/> UNK <input type="checkbox"/> NA			18. ESTIMATED CORRECTION COST <input type="checkbox"/> UNK <input type="checkbox"/> NA		
19. ITEM UNDER WARRANTY <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> UNK <input type="checkbox"/> NA			20. WORK UNIT CODE OR PSEUDO WUC		
21. ACTION OR DISPOSITION					
A. HOLDING EXHIBIT UNTIL <i>(Date)</i> <input type="checkbox"/> NA		B. HOLDING ACTIVITY	C. RELEASED TO	D. RETURNED TO	E. REPAIRED
22. DETAILS					
A. CIRCUMSTANCES PRIOR TO DIFFICULTY OR ENHANCEMENT <i>(Give facts and circumstances leading to the occurrence)</i>					
B. DESCRIPTION AND CAUSE OF DIFFICULTY OR ENHANCEMENT <i>(Give a concise, chronological description and cause of the occurrence)</i>					
C. ACTION TAKEN OR RECOMMENDED <i>(Specify action taken to: (1) remedy the occurrence or incorporate the enhancement; (2) provide safety and security; and (3) prevent recurrence. Recommend a solution which, in the originator's opinion, will correct or assist in resolution of the stated situation. If there is no recommended solution, enter "NONE".)</i>					