PERSONNEL REGISTER

For use of this form, see AR 680-1; the proponent agency is MILPERCEN

Organization:

Date

Date and Time	ACTION		REMARKS				Name (Print) (*First Line*) Signature (*Second Line*)	SOCIAL SECURITY NUMBER	GRADE	REMARKS
	IN	OUT	LEAVE	TDY	PCS	OTHER				
1	2	3	4	5	6	7	8	9	10	11

Edition of 1 Dec 70 is obsolete

VADF Form 27 PR 1 OCT 06