

ORN		JCN / LITS WO No.		Serv	U/S	Scrap	Total Working Hrs		
Originator's Printed Name		Symptom/Work Required			Action Taken				
SNOW									
Date									
B/F		NSN / Part No.		Serial No.					
Description				MWO Raised (✓)		Co-ord Printed Name		Date	

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