Tool Kit
Issue/Tool Check/Return Log

Issue Centre Identity:

Sheet No:

*Aircraft Ser No/*Toolkit Ser No/*Remote Location/*Off-Aircraft.................................. *Delete as applicable

Line	Issue / Tool Check							Return				
	A	B	C	D	E	F	G**	H	J	K	L	M
	Date and Time	Indicate: Initial Issue or Tool Check	Tally No	Description (Toolkit No)	Remarks	Printed Name and Signature	Printed Name and Signature	Date and Time	Indicate: Return or Tool Check	Remarks	Printed Name and Signature	Printed Name and Signature
1												
2												
3												
4												
5												
6												
7												
8												

** Only used if required by single Service policy   **Note:** For further guidance on tool control procedures refer to MAM-P Chapter 4.13.1

	Issue / Tool Check							Return				
	A	B	C	D	E	F	G**	H	J	K	L	M
Line	Date and Time	Indicate: Initial Issue or Tool Check	Tally No	Description (Toolkit No)	Remarks	Printed Name and Signature	Printed Name and Signature	Date and Time	Indicate: Return or Tool Check	Remarks	Printed Name and Signature	Printed Name and Signature
9												
10												
11												
12												
13												
14												
15												
16												
17												

** Only used if required by single Service policy   **Note:** For further guidance on tool control procedures refer to MAM-P Chapter 4.13.1