TEMPORARY OUTUL RECENTION OF CARD

Army Form I 5033

Army No. and Rank/4853829 Tow.	Signature of Dental Officer Date and Place of Examination				
Unit 59 T.R. RAC. Squadron Bty. or Coy.					
Age Date of Enlistment	Dental Centre	Ref. No.	Date	Treatment	Initials of Dental Officer
Period of Engagement					
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NOTATION (B)		5			
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Remarks: Oral Hygiene—		مرا	alt i	PLGOP(C	m*