

OFFICIAL OBSERVER REPORT/RECORD for month of: _____ 20__ OO Call: _____

No information on this form in any way constitutes conclusions or inferences regarding the source of rules violations.

DIRECTIONS: Send the top two copies of this form to your OO Coordinator or SM the first of each month. He will forward one to HQ. Keep the bottom for your records or a card file equivalent.

Call Sign Heard	Time	Date	Freq	Mode	Observations Category	Category Code	Remarks	Date Sent
						1 = Frequency Instability		
						2 = Chirp		
						3 = Spurious		
						4 = Harmonic		
						5 = Hum		
						6 = Key Clicks		
						7 = Broad Signal		
						8 = Distorted Audio		
						9 = Over Deviation		
						10 = Out of Band		
						11 = Improper ID		
						12 = Obscenity, Indecency		
						13 = Causing Interference		
						14 = Good Operator Report		
						15 = Carrier		
						20 = Misc. (explain)		
< TOTAL NUMBER						Approx. number of hours spent monitoring =		

I need supplies to continue my OO work! Please send the quantity of forms indicated to:

Name: _____ Call _____ **Quantity**

FSD-213 OO Advisory Cards _____

Address: _____ FSD-23 OO Monthly Report/Record _____

ZIP _____ FSD-15 Good Operator Cards _____