## Form WI-2

Weapons Inspection Report of							_ Battalion,				Brigade, Col.						, Commanding								
A <sup>re</sup>	165104668705	olvers Pistols		Muskets- Rifled			Musket- Smoothbore			Rifles- Breechloading			Carbines- Breechloading			Musketoons			Other- Specify			TOTAL			
	Number Inspected	Number Rejected	Number Repaired	Number Inspected	Number Rejected	Number Repaired	Number Inspected	Number Rejected	Number Repaired	Number Inspected	Number Rejected	Number Repaired	Number Inspected	Number Rejected	Number Repaired	Number Inspected	Number Rejected	Number Repaired	Number Inspected	Number Rejected	Number Repaired	Number Inspected	Number Rejected	Number Repaired	
Field Officers																									
Staff												9													
1st Company																									
2nd Company																									
3rd Company		11																							
4th Company																									
5th Company																									
6th Company																					50:				
7th Company										a															
8th Company																									
9th Company																									
10th Company																								58	
2																									
Others (Specify)																									
TOTAL																									

I certify that all weapons have been inspected and found to be in good working order or have otherwise been repaired or removed from use and that all ammunition has been inspected and found to be properly and authentically prepared blank rounds.