## REGIMENTAL DOCUMENTS

H.Q. FILE No.

CONTENTS	NON-EFFECTIVE BY
COMBINED DECLARATION FORM OR ATTESTATION AND MEDICAL HISTORY (M.F.M.1 & 1A) OR (M.F.M.2 & 2A)	DEATH
SERVICE AND CASUALTY FORM (M.F.M.4 & 4A) (A.F.B.103)	DATE
PARTICULARS OF FAMILY (M.F.M.5)	CAUSE
FIELD CONDUCT SHEET (M.F.M.6) (A.F.B.122)	AUTHORITY
CERTIFICATE OF SERVICE (M.F.M.8) COPY OF, OR DISCHARGE CERTIFICATE (M.F.M.7) COPY OF	
FORM OF WILL (M.F.M.10 OR M.F.M.10A)	
DENTAL HISTORY SHEET	DISCHARGE
MEDICAL REPORT OR CASE HISTORY SHEET	DATE
MEDICAL EXAMINATION ON LEAVING THE SERVICE	REASON
TRANSFER CLOTHING STATEMENT	AUTHORITY
LAST PAY CERTIFICATE (M.F.D.930A)	
PROCEEDINGS ON DISCHARGE	
PROCEEDINGS COURT OF ENQUIRY	DESERTION
DECLARATIONS COURT OF ENQUIRY	DATE
PAY SHEETS	AUTHORITY
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