1. CONSOLE TYPE OR MODEL	2. PART NUMBER	3. SERIAL NUMBER

4. OXYGEN SERVICE			
STATUS *a*	SYS-PSI *b*	DATE CERT SVC BL *c*	PID *d*

5. OXYGEN CYLINDER HYDROSTATIC TEST DUE

6. ACCESSORIES						
COMPONENT AND SERIAL NUMBER *a*	REQ *b*	AUTH *c*	O/H *d*	INSP CYCL *e*	TIME CHG DUE *f*	LOCAL USE *g*

DA FORM 2408-28, DEC 1991
EDITION OF DEC 84 IS OBSOLETE

OXYGEN CONSOLE SERVICE RECORD
For use of this form, see DA PAM 738-751; the proponent agency is DCSLOG

APD LC v1.00

7. INSPECTION DATA							
TYPE INSP/TEST *a*	DATE INSP *b*	DATE DUE *c*	INITIALS OR PID *d*	TYPE INSP/TEST *a*	DATE INSP *b*	DATE DUE *c*	INITIALS OR PID *d*

8. REPAIR/MWO DATA					
DISCREPANCY *a*	DATE CORR *b*	INITIALS OR PID *c*	DISCREPANCY *a*	DATE CORR *b*	INITIALS OR PID *c*