Name of pc	Date of Form
Name of auditor	Place of session
This form is done by the Auditor with Metered.	a Pc. It is not
1. Visible physical defects	
2. Physical disabilities	
3. Perception difficulties	
4. Past illnesses	
5. Past Operations	
6. Any current illness	
7. Any continual pains	
8. Any occasional pains	
9. Any continual aches	

10	Any occasional aches
11.	Any continual unwanted sensations
12.	Any occasional unwanted sensations
13.	Tiredness - continual
14.	Tiredness - occasional
15.	Emotional tone by pc statement
15 (a). Any fears
15 (b). Chronic worries
16.	Emotional Tone by Auditors inspection
17.	Any disability payment or pension
18.	Any familial history of insanity

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L. RON HUBBARD Founder