PART VI - AUTHENTICATION

Printed Name of Real Man\Woman

Printed Name of Whinner

HURT FEELINGS REPORT

Signature

Signature

OFFICAL REPORT - 8662232B

AUTHORYITY: Whiner Reporting Agency **PRINCIPAL PURPOSE:** To assist whiners in documenting hurt feelings, and to provide managers with a list of personnel who require additional counseling, leadership, and support. **ROUTING USES:** For subordinate leader development IAW FM 22-102. Leaders and whiners should use this form as necessary. **DISCLOSER:** Discloser is voluntary, but repeated discloser may result in a form 779-1A, Report of Wall to Wall Counseling. PART I - ADMINISTRATIVE DATA C. Date of Report: D PART II - INCIDENT REPORT A. Date of Feelings hurt: PART III - INJURY (Mark all the apply) 1. WHICH EAR WERE THE WORDS OF HURTFULNESS SPOKEN INTO? 2. IS THERE PERMANENT FEELING DAMAGE? RIGHT ☐ BOTH □ NO ☐ MAYBE ☐ LEFT 3. DID YOU REQUIRE A "TISSUE" FOR TEARS? 4. HAS THIS RESULTED IN A TRAUMATIC BRAIN INJURY? MULTIPLE: ☐ YES □ NO ☐ YES □ NO ☐ MAYBE PART IV - REASON FOR FILING THIS REPORT (Mark all the apply) Someone needs to fix my problems I am thin skinned the weather is too cold I am a wimp My feelings are easily hurt the weather is too hot I have women/man-like hormones I didn't sign on for this the weather is too dry I am a crybaby I was told that I am not competent the weather is too wet Six beers is not enough ALL OF THE ABOVE AND MORE I want my mommy PART V - NARRATIVE (Tell us in your own sissy words how your feelings were hurt.)

We take hurt feelings seriously. If you don't have someone who can give you a hug and make things all better, please let us know and we will promptly dispatch a "hugger" to you ASAP. In the event we are unable to find a "hugger" we will notify the fire department and request that they send fire personnel to your location. If you are in need of supplemental support, upon written request, we will make every reasonable effort to provide you with a "blankey", a "binky", and/or a bottle of warm milk if you so desire.