

REPORT MADE AT STATION OR LOCATION DATE TIME BY NAME NO. STATION

SERIAL NUMBER

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CONCLUSIONS

No limited assignment personnel and or stand unaid to this organization

[illegible]

CERTIFY THAT THIS MORNING REPORT IS CORRECT

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SIGNATURE

RICHARD A. BURKE

WOJG

USA

RESTRICTED

1. *What is the purpose of this study?*

* D. COPY FROM MR. OR MRS.