



CLASSIFIED

**MONTHLY REPORT**

FORM 1000

5 APR 11 1945

PAGE 2

ORGANIZATION **Co I**

**1st Inf Regt**

**Inf**

SECTION OR LOCATION **1st Battalion 1st Infantry Division**

NAME **IS** NUMBER **15** GRADE **1st Lt** POS. **1st Lt** CODE

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VERIFY THAT THIS MONTHLY REPORT IS CORRECT. PAGE 2 OF 2 PAGES

*Carl J. Oskala*

**CARL J. OSKALA**

**1st Lt**

**1st Lt**

**1st Lt**