

**RESTRICTED MORNING REPORT** FORM 2400 **27 Feb 54** **5**  
**ORGANIZATION** **Med Det 137th Inf Hq** **MD**  
**STATION OR LOCATION** **Bruck VA 9475 Verd Is** (ADD OR SERVICE)

**NAME** **McClure, Robert L.** **UNASSIGNED** **NO. 39550658** **SEC 5** **CODE M12**

**By 409**  
**Pr Dy to LVA sent to 91 Evac Hosp**  
**per Sec II Cir 69 Hq EROUSA 13**  
**June 1944**

**Limited Assignment Personnel**  
**Assigned or Attached Unassigned**  
**1 En 0 Officers 1 Total**

**RECORD OF EVENTS**  
**BEST IN THE ATTACK**

DATE	RECORDED	TOTAL	RECORDED	PRESENT				ABSENT			
				PL	PL	PL	PL	PL	PL	PL	PL
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I CERTIFY THAT THIS MORNING REPORT IS CORRECT. **WAGE 1 1/2**

**SIGNATURE: [Signature]**  
**NAME: CARL A. ARDA**  
**1 1/2**