

WATERING REPORT - 2018-2019
CORNFIELD: Watering Inf

ORGANIZATION (S) **NAME** (R) **TEL**
100-20-1000 **DATE OF GRANTING**

STATION OR LOCATION **WYOMING AV 3770**

SEARCHED **INDEXED** **SERIALIZED** **FILED** **MOS** **CODE**

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Rd to Pvt

No. 1 in the **basic personnel area**

No time can assign personnel equal
or status unequal to this organ.

I CERTIFY THAT THIS MORNING REPORT IS CORRECT

PAGE 1 OF 1 PAGES

SIGNATURE James J. Murray

GEBARD T. ARMSTRONG

NAME **STREET OR ADDRESS**

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(GRADE) _____ (CLASS OR SERVICE) _____

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