

**CAMERA OPERATOR'S CERTIFICATE**

This form must follow the reel(s) from start of filming until approval of reel(s) by Section.

JOB NO. 117		REEL NO. 18	
DATE 27-8-53	TIME 2 hrs	EXPOSURES 2726	
TYPE OF FILM Kodak		TYPE OF DOCUMENT G. I. 44	
REDUCTION 24-1	FIRST DOCUMENT 46400	LAST DOCUMENT 49100	

**CERTIFICATION**

I THE UNDERSIGNED OPERATOR, HEREBY CERTIFY THAT THE MICROPHOTOGRAPHS APPEARING IN THIS REEL ARE TRUE COPIES OF THE ORIGINAL DOCUMENTS INDEXED ABOVE.

OPERATOR  
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**SECTION 2**

**DENSITY REPORT**

DENSITY SATISFACTORY	LIGHT	DARK
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CHECKED BY OPERATOR

DATE

**SECTION 3**

**INSPECTION REPORT**

DATE

I HEREBY CERTIFY THAT APART FROM THE RECORDS MENTIONED BELOW WHICH HAVE BEEN SET ASIDE FOR RETAKE, THIS REEL IS AN EXACT COPY OF THE ORIGINAL MENTIONED IN THE OPERATOR'S REPORT.

REFERENCE	NATURE OF RETAKE(S)

REEL APPROVED:

DATE

SIGNATURE

NOTE: For future reference, all three sections of this form must be completed.