

CAMERA OPERATOR'S CERTIFICATE

This form must follow the reel(s) from start of filming until approval of reel(s) by Section 1

SECTION 1

JOB NO.	117
DATE	22-8-63
TYPE OF FILM	16MM. A.G. R.B.
FIRST DOCUMENT	23751
REDUCTION	1-1
TYPE OF DOCUMENT	CTD 44
EXPOSURES	2075
REEL NO.	10
LAST DOCUMENT	25825

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

OPERATOR *#2*

SECTION 2

DENSITY REPORT

DENSITY SATISFACTORY	
LIGHT	
DARK	

CHECKED BY OPERATOR _____ DATE _____

SECTION 3

INSPECTION REPORT

DATE _____

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: _____

SIGNATURE _____ DATE _____

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