

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	
DATE	87-8-63	TIME	8:30
TYPE OF FILM	16mm	REDUCTION	2.5x
FIRST DOCUMENT	49101	TYPE OF DOCUMENT	Q.T. 44
LAST DOCUMENT	58440	EXPOSURES	19

CERTIFICATION

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

OPERATOR
3

SECTION 2

DENSITY REPORT

DENSITY SATISFACTORY	LIGHT	DARK
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CHECKED BY OPERATOR

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.