★ U.S. GOVERNMENT PRINTING OFFICE 1967-248-101

EXTRACT COPY OF MORNING REPORT
(AR 600-40)

SECTION I - IDENTIFICATION OF INDIVIDUAL CONCERNED

1. LAST NAME, FIRST NAME, MIDDLE INITIAL (Include Sr, Jr, 2d, III, etc., as appropriate)	2. GRADE	3. SERVICE NUMBER
BONEY Clifton Jr	SGT E-5	

SECTION II - EXTRACT COPY OF MORNING REPORT OF

4. REPORTING UNIT AS SHOWN ON MORNING REPORT	5. PARENT UNIT AS SHOWN ON MORNING REPORT
Company A	3d Battalion 506th Infantry APO SF 96383

6. DATE, NAME, SERVICE NUMBER, GRADE, REMARK, AND AUTHENTICATION EXTRACTED FROM MORNING REPORT

Ending 2400 2 May 68

REDISTRIBUTION

Boney Clifton

SGTE5 Dpt Lv LO 5-10 DA HQS 101st Abn Div
Emerg lv 30 da eff 1 May 68

/t/JOHN E HARRISON
Executive Officer

1LT INF

/s/John E Harrison

Ending 2400 24 Jun 68

REDISTRIBUTION

Boney Clifton

SGTE5 Ch Lv
Emerg lv 30 days (Ref M/R 2May68) ext 20 days

/t/JAMES R KESSINGER
Assistant Adjutant

1LT INF

/s/James R Kessinger

Ending 2400 12 Jul 68

REDISTRIBUTION

Boney Clifton

SGTE5 Ch AWOL
Fr Emerg lv 0001 hrs 20Jun68

/t/JOHN E HARRISON
Executive Officer

1LT INF

/s/John E Harrison

SECTION III - CERTIFICATION AND AUTHENTICATION OF EXTRACT

7. I CERTIFY THAT I AM (Check one)

☐ THE COMMANDING OFFICER ☒ THE PERSONNEL OFFICER OF THE ORGANIZATION RECORDED IN SECTION II

☐ AN ADJUTANT GENERAL IN THE OFFICE OF THE ADJUTANT GENERAL, UNITED STATES ARMY,

AND OFFICIAL CUSTODIAN OF THE MORNING REPORTS OF THE ORGANIZATION RECORDED IN SECTION II, AND THAT THE FOREGOING IS A TRUE AND COMPLETE COPY (Including Any Signature or Initials Appearing Thereon) OF THAT PART OF THE MORNING REPORT OF SAID ORGANIZATION PERTAINING AT Company A 3d Bn (Abn) 506th Inf APO 96383 FOR THE DATES INDICATED IN SAID COPY WHICH RELATES TO THE PERSON REFERRED TO IN EXTRACT COPY.

8. COMPLETE DESIGNATION OF ORGANIZATION AND STATION (Including address) HAVING CUSTODY OF THE MORNING REPORT

Company A 3d Bn (Abn) 506th Inf, 101st Abn Div, APO 96383

9. DATE THIS EXTRACT PREPARED

13 July 1968

10. TYPED NAME, GRADE, AND BRANCH OF SERVICE

NICHOLAS M HARAS, CPT, INF, ADJ

11. SIGNATURE (Facsimile or Stamped Signature Not Acceptable)

DA FORM 1 APR 68 188

PREVIOUS EDITIONS OF THIS FORM ARE OBSOLETE.